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1990

HCFA COMMON PROCEDURE CODING SYSTEM (HCPCS) 1990
(NON-CPT-4 PORTION)

JANUARY 1990

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HCFA COMMON PROCEDURE CODING SYSTEM (HCPCS)

(NON-CPT-4 PORTION)

The HCPCS contains terminology and codes for all procedures covered by the Medicare and Medicaid programs. For physician services, HCPCS contains the terminology and codes in the American Medical Association's (AMA) Current Procedural Terminology, (CPT 1990). The Health Care Financing Administration (HCFA) developed the terminology and codes for services not contained in CPT 1990. Because of our agreement with the AMA whose codes are proprietary, HCFA is prohibited from releasing the full coding system to other than HCFA contractors. HCFA's alphanumeric codes are not restricted and this section of the code is attached. You may wish to contact the AMA directly about obtaining a copy of the CPT 1990. Their address is 535 North Dearborn Street, Chicago, Illinois 60610. The attached coding system is formatted as shown on the following sheets.

HCPCS TAPE FILE FORMAT

<u>FIELD NUMBER</u>	<u>FIELD TYPE</u>	<u>STARTING POSITION FIELD</u>	<u>ENDING POSITION FIELD</u>	<u>DESCRIPTION</u>
FD-01 Indent Code	X	1	1	<u>Title Record</u> 1 = Titles 2 = Modifier <u>Procedure Record</u> 3 = First line of Proc Record also contains detail information pos 94-186. <u>Indent PRT Proc Code</u> 4 = 2nd, 3rd, 4th, etc., description of Proc Record. No detail in pos 94-186. 5 = Indent, Control Statement. 6 = Subheading
FD-02 PROC CODE	X(5)	2	6	A five digit CPT-4 code. (See Appendix B of the CPT-4 text for HCFA code ranges.)
FD-03 SEQ NUMBER	9(5)	7	11	Sequence number by 100s. Groups procedure codes together.
FD-04	X(1)	12	12	Used to control spacing of reports. T = Top of page B = Space before A = Space after 2 = Space before and after BLANK = single spacing

<u>FIELD NUMBER</u>	<u>FIELD TYPE</u>	<u>STARTING POSITION FIELD</u>	<u>ENDING POSITION FIELD</u>	<u>DESCRIPTION</u>
FD-05 Asterisk	X(1)	13	13	An asterisk (*) in position 8 indicates a procedure which includes variable pre and postoperative services. For more information see the surgery guidelines - 1990 CPT-4.
FD-06 Procedure Description	X(80)	14	93	Description of physician's service.
<u>CAUTION:</u> Of the fields that follow, only FD-07 CIM, FD-08 COV, FD-09 ILC, FD-14 X-REF, FD-21 M/D and FD-22 AC have been updated by HCFA. Other fields may contain correct information, but you are responsible for their verification before use.				
FD-07 CIM	X(10)	94	103	<u>Coverage Issues Manual Reference</u> - A 10-position field containing 2 groups of 5 positions; each group represents a section of the CIM.
FD-08 COV	X(1)	104	104	<u>Coverage</u> - A one position alpha field containing the following data elements: D = Special Coverage Instructions Apply M = Noncovered by Medicare S = Non-covered by Medicare Statute C = Covered by Medicare Blank = Carrier Discretion
FD-09 ILC	X(12)	105	116	<u>Independent Laboratory Certification</u> - A 12-position field containing 4 groups of 3 positions; each used to classify laboratory procedures according to the specialty certification categories listed by HCFA. Any generally certified laboratory (e.g., 100) may perform any of the tests in its subgroups, e.g., 110, 120, etc.).

<u>FIELD NUMBER</u>	<u>FIELD TYPE</u>	<u>STARTING POSITION FIELD</u>	<u>ENDING POSITION FIELD</u>	<u>DESCRIPTION</u>
				<p>The categories are:</p> <p>010 Histocompatibility testing</p> <p>100 Microbiology</p> <p>110 Bacteriology</p> <p>120 Mycology</p> <p>130 Parasitology</p> <p>140 Virology</p> <p>150 Other Microbiology</p> <p>200 Serology</p> <p>210 Syphilis</p> <p>220 Other Serology</p> <p>300 Clinical Chemistry</p> <p>310 Routine Chemistry</p> <p>320 Urinalysis</p> <p>330 Other Clinical Chemistry</p> <p>400 Hematology</p> <p>500 Immunohematology</p> <p>510 Blood Grouping & RH Typing</p> <p>520 RH Titers</p> <p>530 Cross Matching</p> <p>540 Other Immunohematology</p> <p>600 Pathology</p> <p>610 Histopathology</p> <p>620 Oral Pathology</p> <p>630 Exfoliative Cytology</p> <p>700 Physiological Testing</p> <p>710 EKG Services</p> <p>800 Radiobioassay</p> <p>900 Procedures which may be performed by any certified independent laboratory</p>
FD-101C	X(1)	117	117	<p><u>Individual Consideration</u></p> <p><u>TAG</u> - A one position alpha field containing the following information elements:</p> <p>R = Medicaid - suspend for medical review</p> <p>S = Medicare - suspend for medical review</p> <p>U = Medicare and Medicaid - suspend for medical review</p>

<u>FIELD NUMBER</u>	<u>STARTING FIELD POSITION TYPE FIELD</u>	<u>ENDING POSITION FIELD</u>	<u>DESCRIPTION</u>
FD-11 SP	X (1) 118	118	<p><u>Speciality Procedures</u> - A one position alpha code used to identify procedures that can be performed by a physician or a provider limited to a certain speciality. The following information elements are used:</p> <p>A = procedure performed by a podiatrist or a chiropractor;</p> <p>B = procedure that can be performed by a podiatrist or a dentist;</p> <p>C = procedures that can be performed by a chiropractor;</p> <p>D = procedures that can be performed by a dentist;</p> <p>E = procedures that can be performed by a chiropractor, dentist or podiatrist;</p> <p>F = procedure that can be performed by a chiropractor or a dentist;</p> <p>P = procedure that can be performed by a podiatrist; or</p> <p>X = procedures that can be performed by x-ray suppliers.</p>

<u>FIELD NUMBER</u>	<u>FIELD TYPE</u>	<u>STARTING POSITION FIELD</u>	<u>ENDING POSITION FIELD</u>	<u>DESCRIPTION</u>
FD-12 RI	X (1)	119	119	<p>Reimbursement Information - a one position code containing the following elements:</p> <p>I = Drugs that can be given intravenously;</p> <p>P = Primary code for reimbursement purposes. Payment may be made under this code. The related secondary code is in Field 14. If there is more than one secondary code, the most frequently used one is in Field 14. The appropriate modifier must be used when a secondary code is changed to a primary code. For reimbursement, Code P, Field 14 must contain a valid HCPCS code;</p> <p>R = Listed procedures to be reimbursed 100 percent by Medicare B; e.g., certain surgical procedures performed in an independent ambulatory surgical center (ASC), or in a hospital affiliated ambulatory surgical center;</p> <p>S = Secondary code for reimbursement purposes. Payment for this procedure is made under the primary code shown</p>

<u>FIELD NUMBER</u>	<u>STARTING FIELD POSITION TYPE FIELD</u>	<u>ENDING POSITION FIELD</u>	<u>DESCRIPTION</u>
			in Field X-Ref 14. The appropriate modifier must be used when a procedure is changed for reimbursement purposes. For reimbursement code S, Field X-Ref must contain a valid HCPCS code.
FD-13 RVU	X(5) 120 999V99	124	<p><u>Relative Value Units -</u> Decimal point is assumed between third and fourth position. Values are considered guidelines and are <u>not</u> mandatory: - a five position code containing any of the following:</p> <p>BR - (BY REPORT) These procedures are too variable to permit the assignment of unit values. Documentation is required on these procedures in order to justify reimbursement.</p> <p>RNE - (RELATIVITY NOT ESTABLISHED) These services are either too recently developed or infrequently performed for a determination to be made for appropriate allowance. Documentation would be required to justify reimbursement.</p> <p>BLANK - No relative values available at this time.</p>
FD-14 X-REF	X(25) 125	149	<p><u>Cross Reference -</u> a 25 position field containing 5 groups of 5 positions, each identifies a crosswalk to an alpha-numeric or CPT-4 code to relate services previously or currently coded in HCPCS. For CPT, refer to Appendix B of the CPT-4 text.</p>

<u>FIELD NUMBER</u>	<u>FIELD TYPE</u>	<u>STARTING POSITION FIELD</u>	<u>ENDING POSITION FIELD</u>	<u>DESCRIPTION</u>
FD-15 MCM	X(18)	150	167	<u>Medicare Carrier Manual</u> Reference - An 18-position numeric field containing 3 groups of 6 positions; each group represents an MCM section.
FD-16 ANE VAL	X(3) (99V9)	168	170	<u>Anesthesia Value</u> - A three position numeric field containing anesthesia base values. A decimal point is assumed between the second and third position. These values have their origin in the CRVS 64 scale but have been reviewed and upgraded over the years. Values are considered guidelines and are <u>not</u> mandatory.
FD-17 SLHA	X(1)	171	171	<u>Sex/Life Procedure/History</u> <u>Procedure/Age</u> - A one position field containing one of the following elements: 1 = Male only 2 = Female only 3 = Once in a lifetime procedure 4 = Once in a history procedure 5 = Aged (over 65 years of age) 6 = Male-once in lifetime or history procedure 7 = Female-once in lifetime or history procedures
FD-18 SA	X(1)	172	172	<u>Surgical Assist</u> - A one position field in which "Y" indicates procedures for which a surgical assistant may be reimbursed. Can be annotated by the carrier.

<u>FIELD NUMBER</u>	<u>FIELD TYPE</u>	<u>STARTING POSITION FIELD</u>	<u>ENDING POSITION FIELD</u>	<u>DESCRIPTION</u>
FD-19 F/D	X(3)	173	175	<u>Follow-up Days</u> - a three position numeric field for global surgical procedures indicating the number of days for normal uncomplicated follow-up care that will be covered by the surgical procedure reimbursement. To be entered by the carrier.
FD-20 CNTS	X(4)	176	179	<u>Control Statement</u> - 4-digit number to footnote found after the alpha-numeric codes section.
FD-21 M/D	X(4)	180	183	<u>Maintenance Date</u> - Month and year an action is taken on the coding system, this is a computer generated date.
FD-22 AC	X(1)	184	184	<u>Action Code</u> - the type of action taken on the coding system. Show the type of action - either A, C, D, or F with any update of the code: A = Add C = Change in Nomenclature D = Delete F = Change in administrative data field E= Editorial Change (deleted in 1990) I= Under Investigation (deleted in 1990) NOTE: A blank in this field indicates an original code. No subsequent maintenance.
FD-23 DCA	X(1)	185	186	<u>Date Code Added</u> - A two-position numeric field to indicate the year in which the code was added to HCPCS.
FD-24	X(1)	187	187	BLANK

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A L P H A - N U M E R I C I N D E X

MEDICAL CODING POLICY STAFF
OFFICE OF COVERAGE POLICY
BUREAU OF POLICY DEVELOPMENT
HEALTH CARE FINANCING ADMINISTRATION

REVISED BY:

MARY B. COOPER
OLIVE ANN EVANS

HEALTH CARE FINANCING ADMINISTRATION
1 J 2 EAST LOW RISE
6325 SECURITY BOULEVARD
BALTIMORE, MARYLAND 21207
FTS - 646-5323 OR
(301) 966-5323

A

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XYLOCAINE

DELETED (90)

Y

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95130

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95130

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E1091

Z

ZINACEF

J0697

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COVERAGE ISSUES MANUAL (CTM), AND MEDICARE CARRIERS MANUAL (MCM). ALL
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THE AUTHORITY TO DETERMINE COVERAGE AND PAYMENT POLICY.

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HCFA COMMON PROCEDURE CODING SYSTEM

MODIFIERS

AA ANESTHESIA SERVICES PERSONALLY FURNISHED BY ANESTHESIOLOGIST

AB MEDICAL DIRECTION OF OWN EMPLOYEE(S) BY ANESTHESIOLOGIST
(NOT MORE THAN FOUR EMPLOYEES)

AC MEDICAL DIRECTION OF OTHER THAN OWN EMPLOYEES BY
ANESTHESIOLOGIST (NOT MORE THAN FOUR INDIVIDUALS)

AD SUPERVISION OF MORE THAN FOUR CONCURRENT ANESTHESIA
SERVICES BY ANESTHESIOLOGIST

AE DIRECTION OF RESIDENTS IN FURNISHING NOT MORE THAN TWO
CONCURRENT ANESTHESIA SERVICES - ATTENDING PHYSICIAN
RELATIONSHIP MET

AF ANESTHESIA COMPLICATED BY TOTAL BODY HYPOTHERMIA

AG ANESTHESIA FOR EMERGENCY SURGERY ON A PATIENT WHO IS MORIBUND
OR WHO HAS AN INCAPACITATING SYSTEMIC DISEASE THAT IS A
CONSTANT THREAT TO LIFE (MAY WARRANT ADDITIONAL CHARGE)

AN PA SERVICES FOR OTHER THAN ASSISTANT-AT-SURGERY

AP DETERMINATION OF REFRACTIVE STATE WAS NOT PERFORMED IN THE
COURSE OF DIAGNOSTIC OPHTHALMOLOGICAL EXAMINATION

AR RETURN AMBULANCE TRIP (WHEN FILING FOR A RETURN TRIP, THE
APPROPRIATE PROCEDURE CODE SHOULD BE FOLLOWED BY 'AR')

AS PA SERVICES FOR ASSISTANT-AT-SURGERY

AT ACUTE TREATMENT (THIS MODIFIER SHOULD BE USED WHEN REPORTING
SERVICE A2000 FOR ACUTE TREATMENT)

M/D 1187 A/C A

DCA

M/D 1189 A/C D
M/D 1189 A/C DDCA
DCA

M/D 1187 A/C A

DCA

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HCFA COMMON PROCEDURE CODING SYSTEM

CC	PROCEDURE CODE CHANGE (USE 'CC' WHEN THE PROCEDURE CODE SUBMITTED WAS CHANGED EITHER FOR ADMINISTRATIVE REASONS OR BECAUSE AN INCORRECT CODE WAS FILED)	M/D 1189 A/C	DCA
		M/D 1189 A/C	DCA
DD	POWDERED ENTERAL FORMULAE (THIS SHOULD BE USED WHEN ENTERAL POWDERED PRODUCTS ARE SUPPLIED)		
EP	SERVICE PROVIDED AS PART OF MEDICAID EARLY PERIODIC SCREENING DIAGNOSIS AND TREATMENT (EPSDT) PROGRAM	M/D 986 A/C A	DCA
		M/D 986 A/C A	DCA
ET	EMERGENCY TREATMENT (DENTAL PROCEDURES PERFORMED IN EMERGENCY SITUATIONS SHOULD SHOW THE MODIFIER 'ET')		
FP	SERVICE PROVIDED AS PART OF MEDICAID FAMILY PLANNING PROGRAM	M/D 986 A/C A	DCA
LL	LEASE/RENTAL (USE THE 'LL' MODIFIER WHEN DME EQUIPMENT RENTAL IS TO BE APPLIED AGAINST THE PURCHASE PRICE)		
LR	LABORATORY ROUND TRIP	M/D 986 A/C A	DCA
LS	FDA-MONITORED INTRAOCULAR LENS IMPLANT		
LT	LEFT SIDE (USED TO IDENTIFY PROCEDURES PERFORMED ON THE LEFT SIDE OF THE BODY)		
MP	MULTIPLE PATIENTS SEEN (USE ONLY IN CONNECTION WITH CPT-4 VISIT CODES 90300 - 90470, VISITS TO SKILLED NURSING, INTERMEDIATE CARE AND LONG-TERM CARE FACILITY AND NURSING HOME, BOARDING HOME, DOMICILIARY OR CUSTODIAL CARE MEDICAL SERVICES)	M/D 1189 A/C C	DCA
		M/D 1189 A/C C	DCA
		M/D 1189 A/C C	DCA
		M/D 1189 A/C C	DCA
MS	SIX MONTH MAINTENANCE AND SERVICING FEE FOR REASONABLE AND NECESSARY PARTS AND LABOR WHICH ARE NOT COVERED UNDER ANY MANUFACTURER OR SUPPLIER WARRANTY	M/D 1188 A/C A	DCA
		M/D 1188 A/C A	DCA
		M/D 1188 A/C A	DCA
NR	NEW WHEN RENTED (USE THE 'NR' MODIFIER WHEN DME WHICH WAS NEW AT THE TIME OF RENTAL IS SUBSEQUENTLY PURCHASED)		
NU	NEW EQUIPMENT		

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HCFA COMMON PROCEDURE CODING SYSTEM

PL	PROGRESSIVE ADDITION LENSES	M/D 1188 A/C A	DCA
QC	SINGLE CHANNEL MONITORING	M/D 1188 A/C A	DCA
QD	RECORDING AND STORAGE IN SOLID STATE MEMORY BY A DIGITAL RECORDER	M/D 1188 A/C A	DCA
QE	PRESCRIBED AMOUNT OF OXYGEN IS LESS THAN 1 LITER PER MINUTE (LPM)	M/D 1188 A/C A	DCA
QF	PRESCRIBED AMOUNT OF OXYGEN EXCEEDS 4 LITERS PER MINUTE (LPM) AND PORTABLE OXYGEN IS PRESCRIBED	M/D 1189 A/C C M/D 1189 A/C C	DCA DCA
QG	PRESCRIBED AMOUNT OF OXYGEN IS GREATER THAN 4 LITERS PER MINUTE(LPM)	M/D 1188 A/C A	DCA
QH	OXYGEN CONSERVING DEVICE IS BEING USED WITH AN OXYGEN DELIVERY SYSTEM	M/D 1188 A/C A	DCA
QT	RECORDING AND STORAGE ON TAPE BY AN ANALOG TAPE RECORDER	M/D 1188 A/C A	DCA
RP	REPLACEMENT AND REPAIR -RP MAY BE USED TO INDICATE REPLACEMENT OF DME, ORTHOTIC AND PROSTHETIC DEVICES WHICH HAVE BEEN IN USE FOR SOMETIME. THE CLAIM SHOWS THE CODE FOR THE PART, FOLLOWED BY THE 'RP' MODIFIER AND THE CHARGE FOR THE PART.		
RR	RENTAL (USE THE 'RR' MODIFIER WHEN DME IS TO BE RENTED)		
RT	RIGHT SIDE (USED TO IDENTIFY PROCEDURES PERFORMED ON THE RIGHT SIDE OF THE BODY)		
SF	SECOND OPINION ORDERED BY A PROFESSIONAL REVIEW ORGANIZATION (PRO) PER SECTION 9401, P.L. 99-272 (100% REIMBURSEMENT - NO MEDICARE DEDUCTIBLE OR COINSURANCE)	M/D 986 A/C A M/D 986 A/C A M/D 986 A/C A	DCA DCA DCA
SP	NO OTHER PATIENTS SEEN AT THIS FACILITY (USE ONLY IN CONNECTION WITH CPT-4 VISIT CODES 90300 - 90470, VISITS TO SKILLED NURSING, INTERMEDIATE CARE AND LONG-TERM CARE FACILITY AND NURSING HOME, BOARDING HOME, DOMICILIARY OR CUSTODIAL CARE MEDICAL SERVICES)	M/D 1189 A/C A M/D 1189 A/C A M/D 1189 A/C A M/D 1189 A/C A	DCA DCA DCA DCA
TC	TECHNICAL COMPONENT. UNDER CERTAIN CIRCUMSTANCES, A CHARGE		

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MAY BE MADE FOR THE TECHNICAL COMPONENT ALONE. UNDER THOSE CIRCUMSTANCES THE TECHNICAL COMPONENT CHARGE IS IDENTIFIED BY ADDING MODIFIER 'TC' TO THE USUAL PROCEDURE NUMBER. TECHNICAL COMPONENT CHARGES ARE INSTITUTIONAL CHARGES AND NOT BILLED SEPARATELY BY PHYSICIANS. HOWEVER, PORTABLE X-RAY SUPPLIERS ONLY BILL FOR TECHNICAL COMPONENT AND SHOULD UTILIZE MODIFIER TC. THE CHARGE DATA FROM PORTABLE X-RAY SUPPLIERS WILL THEN BE USED TO BUILD CUSTOMARY AND PREVAILING PROFILES.

UE USED DURABLE MEDICAL EQUIPMENT

VP APHAKIC PATIENT

YY SECOND SURGICAL OPINION. SEE SF FOR PRO-ORDERED SERVICES

ZZ THIRD SURGICAL OPINION

MODIFIERS TO IDENTIFY AMBULANCE PLACE OF ORIGIN AND DESTINATION FOR USE IN ITEMS 12 AND 13 OF HCFA FORM 1491.

THESE ARE ONE DIGIT CODES TO BE USED IN COMBINATION. THE FIRST PLACE ALPHA CODE = ORIGIN; THE SECOND PLACE ALPHA CODE = DESTINATION.

CODE	DESCRIPTION	ORIGIN	DESTINATION
-D	DIAGNOSTIC OR THERAPEUTIC SITE OTHER THAN "P" OR "H" WHEN THESE ARE USED AS ORIGIN CODES	M/D 1189 A/C A	DCA
-E	RESIDENTIAL, DOMICILIARY, CUSTODIAL FACILITY (OTHER THAN AN 1819 FACILITY)	M/D 1189 A/C A	DCA
-H	HOSPITAL	M/D 1189 A/C A	DCA
-N	SKILLED NURSING FACILITY (SNF) (1819 FACILITY)	M/D 1189 A/C A	DCA
-P	PHYSICIAN'S OFFICE	M/D 1189 A/C A	DCA
-R	RESIDENCE	M/D 1189 A/C A	DCA
-S	SCENE OF ACCIDENT OR ACUTE EVENT	M/D 1189 A/C A	DCA
-X	(DESTINATION CODE ONLY) INTERMEDIATE STOP AT PHYSICIAN'S OFFICE	M/D 1189 A/C A	DCA

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M/D	1189	A/C	A		DCA
M/D	1189	A/C	D		DCA
M/D	1189	A/C	D		DCA
M/D	1189	A/C	D		DCA
M/D	1189	A/C	D		DCA
M/D	1189	A/C	D		DCA
M/D	1189	A/C	D		DCA
M/D	1189	A/C	D		DCA
M/D	1189	A/C	D		DCA
M/D	1189	A/C	D		DCA
M/D	1189	A/C	D		DCA
M/D	1189	A/C	D		DCA
M/D	1189	A/C	D		DCA
M/D	1189	A/C	D		DCA
M/D	1189	A/C	D		DCA
M/D	1189	A/C	F		DCA
M/D=1189	CNTS	A/C=F	COV=D	BR	A/V
MCM	2125.1	Rvu=	2120.1		
M/D=1189	CNTS	A/C=F	COV=D	BR	A/V
MCM	2125.1	Rvu=	2120.1		

A0010 AMBULANCE SERVICE, BASIC LIFE SUPPORT (BLS)

A0020 AMBULANCE SERVICE, (BLS) PER MILE, TRANSPORT, ONE WAY

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HCFA COMMON PROCEDURE CODING SYSTEM

A0021 AMBULANCE SERVICE, OUTSIDE STATE PER MILE, TRANSPORT (MEDICAID ONLY)

A0030 AMBULANCE SERVICE, CONVENTIONAL AIR SERVICE, TRANSPORT, ONE WAY

A0040 AMBULANCE SERVICE, AIR, HELICOPTER SERVICE, TRANSPORT

A0050 AMBULANCE SERVICE, EMERGENCY, WATER, SPECIAL TRANSPORTATION SERVICES

A0060 AMBULANCE SERVICE, WAITING TIME, ONE HALF (1/2) HOUR INCREMENTS

WAITING TIME TABLE

UNITS	TIME	UNITS	TIME
1	1/2 TO 1 HRS.	5	3 TO 3-1/2 HRS.
2	1 TO 1-1/2 HRS.	7	3-1/2 TO 4 HRS.
3	1-1/2 TO 2 HRS.	8	4 TO 4-1/2 HRS.
4	2 TO 2-1/2 HRS.	9	4-1/2 TO 5 HRS.
5	2-1/2 TO 3 HRS.	10	5 TO 5-1/2 HRS.

A0070 AMBULANCE SERVICE, OXYGEN, ADMINISTRATION AND SUPPLIES, LIFE SUSTAINING SITUATION

A0080 NON-EMERGENCY TRANSPORTATION: PER MILE - VOLUNTEER, WITH NO VESTED OR PERSONAL INTEREST

A0090 NON-EMERGENCY TRANSPORTATION: PER MILE - VOLUNTEER, INTERESTED INDIVIDUAL, NEIGHBOR

A0100 NON-EMERGENCY TRANSPORTATION: TAXI - INTRA CITY

A0110 NON-EMERGENCY TRANSPORTATION AND BUS, INTRA OR INTER STATE CARRIER

M/D=1189 A/C=F COV=D DCA
XR1=A0030 XR2 XR3
MCM 2125.1 2120.1

M/D=1189 A/C=F COV=D DCA
CNTS RVU= BR A/V
MCM 2120.4

M/D=1189 A/C=F COV=D DCA
CNTS RVU= BR A/V
MCM 2120.4

M/D=1189 A/C=F COV=D DCA
CNTS RVU= BR A/V
MCM 2125.1 2120.1

M/D=1189 A/C=F COV=D DCA
CNTS RVU= BR A/V
MCM 2125.1 2120.1

M/D=1189 A/C=F COV=D DCA
CNTS RVU= BR A/V
MCM 2125.1 2120.1

M/D=1189 A/C=F COV=D DCA
CNTS RVU= BR A/V
MCM 2125.2

M/D=1189 A/C=F COV=D DCA
CNTS RVU= BR A/V
MCM 2125.2

M/D=1189 A/C=F COV=D DCA
CNTS RVU= BR A/V
MCM 2125.2

M/D=1189 A/C=F COV=D DCA
CNTS RVU= BR A/V
MCM 2125.2

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HCFA COMMON PROCEDURE CODING SYSTEM

A0120 NON-EMERGENCY TRANSPORTATION: MINI-BUS, MOUNTAIN AREA
TRANSPORTS, OTHER NON-PROFIT TRANSPORTATION SYSTEMS

M/D=1189 A/C=F COV=D DCA
CNTS RVU= BR A/V
MCM 2125.2

A0130 NON-EMERGENCY TRANSPORTATION: WHEEL-CHAIR VAN

M/D=1189 A/C=F COV=D DCA
CNTS RVU= BR A/V
MCM 2125.2

A0140 NON-EMERGENCY TRANSPORTATION AND AIR TRAVEL (PRIVATE OR COMMERCIAL)
INTRA OR INTER STATE

M/D=1189 A/C=F COV=D DCA
CNTS RVU= BR A/V
MCM 2125.2

A0150 NON-EMERGENCY TRANSPORTATION, AMBULANCE, BASE RATE ONE WAY

M/D=1189 A/C=F COV=D DCA
CNTS RVU= BR A/V
MCM 2125

A0160 NON-EMERGENCY TRANSPORTATION: PER MILE - CASE WORKER OR
SOCIAL WORKER

M/D=1185 A/C=C COV=M DCA
CNTS RVU= BR A/V

A0170 NON-EMERGENCY TRANSPORTATION: ANCILLARY: PARKING FEES, TOLLS, OTHER

M/D=1181 A/C COV=M DCA
CNTS RVU= BR A/V

A0180 NON-EMERGENCY TRANSPORTATION: ANCILLARY: LODGING-RECIPIENT

M/D=1181 A/C COV=M DCA
CNTS RVU= BR A/V

A0190 NON-EMERGENCY TRANSPORTATION: ANCILLARY: MEALS-RECIPIENT

M/D=1185 A/C=C COV=M DCA

A0200 NON-EMERGENCY TRANSPORTATION: ANCILLARY: LODGING ESCORT

M/D=1181 A/C COV=M DCA
CNTS RVU= BR A/V

A0210 NON-EMERGENCY TRANSPORTATION: ANCILLARY: MEALS-ESCORT

M/D=1185 A/C=C COV=M DCA
CNTS RVU= BR A/V

A0215 AMBULANCE SERVICE, MISCELLANEOUS DISPOSABLE SUPPLIES
NOT ITEMIZED, IF ITEMIZED USE APPROPRIATE CPT-4
OR ALPHA-NUMERIC SUPPLY CODE

M/D=1189 A/C=F COV=D DCA
MCM 2125.2

A0220 AMBULANCE SERVICE, ADVANCED LIFE SUPPORT (ALS) BASE RATE,
ALL INCLUSIVE SERVICES, EMERGENCY TRANSPORT, ONE WAY

M/D=1189 A/C=F COV=D DCA
MCM 2125.1 2120.1

A0221 AMBULANCE SERVICE, (ALS) PER MILE, TRANSPORT, ONE WAY

M/D=1189 A/C=F COV=D DCA
MCM 2125.1 2120.1

A0222 AMBULANCE SERVICE, RETURN TRIP, TRANSPORT

M/D=1189 A/C=F COV=D DCA
MCM 2125.1 2120.1

A0223 AMBULANCE SERVICE, ADVANCED LIFE SUPPORT (ALS) BASE RATE,
WHERE NONREUSABLE ALS SUPPLIES ARE BILLED SEPARATELY,
EMERGENCY TRANSPORT, ONE WAY

M/D=1189 A/C=F COV=D DCA
MCM 2125.1 2120.1

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A0225 AMBULANCE SERVICE, NEONATAL TRANSPORT, BASE RATE, EMERGENCY
TRANSPORT, ONE WAY

A0999 UNLISTED AMBULANCE SERVICE

CHIROPRACTIC A2000-A2999

A2000 MANIPULATION OF SPINE BY CHIROPRACTOR

MEDICAL AND SURGICAL SUPPLIES A4000 - A4999

A4200 GAUZE PADS, STERILE OR NONSTERILE

A4201 GELFOAM, PER BOTTLE

A4202 GAUZE BANDAGE, ELASTIC

A4203 GAUZE BANDAGE, NON-ELASTIC

A4206 SYRINGE WITH NEEDLE, STERILE 1CC

A4207 SYRINGE WITH NEEDLE, STERILE 2CC

A4208 SYRINGE WITH NEEDLE, STERILE 3CC

A4209 SYRINGE WITH NEEDLE, STERILE 5CC OR GREATER

A4210 NEEDLE-FREE INJECTION DEVICE

A4213 SYRINGE, STERILE, 20 CC OR GREATER

A4214 STERILE SALINE OR WATER, 30 CC VIAL

A4215 NEEDLES ONLY, STERILE, ANY SIZE

A4216 HEMOSTATIC CELLULOSE (E.G., SURGICAL) ANY SIZE

A4244 ALCOHOL OR PEROXIDE, PER PINT

A4245 ALCOHOL WIPES, PER BOX

M/D=1184 A/C COV DCA

M/D=1189 A/C=F COV=D DCA
XR4 XR5 IC=R SLHA
CNTS RVU= 8R A/V
MCM 2125.1 2120.1

M/D=1189 A/C=F COV=D DCA
CNTS RVU= .17 A/V
MCM 2251

M/D=1184 A/C COV DCA

M/D=1189 A/C=D COV DCA
XR1=A4216 XR2 XR3

M/D=1189 A/C=C COV=D DCA
MCM 2050.4

M/D=1189 A/C=A COV=D DCA=90
MCM 2050.4

M/D=1184 A/C COV DCA

M/D=1184 A/C COV DCA

M/D=1184 A/C COV DCA

M/D=1184 A/C COV DCA

M/D=1189 A/C=F COV=M DCA
CIN=60-9 65-1 F/D RI

M/D=1184 A/C COV DCA

M/D=1185 A/C=C COV DCA

M/D=1184 A/C COV DCA

M/D= 986 A/C=E COV DCA

M/D=1184 A/C COV DCA

M/D=1184 A/C COV DCA

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A4246	BETADINE OR PHISOX SOLUTION, PER PINT	*	M/D=1184	A/C	COV	DCA
A4247	BETADINE OR IODINE SWABS/WIPES, PER BOX	*	M/D=1184	A/C	COV	DCA
A4250	URINE TEST OR REAGENT STRIPS OR TABLETS (100 TABLETS OR STRIPS)	*	M/D=1189	A/C=A	COV=M	DCA=90
		*	MCM	2070		
A4252	IRRIGATION KITS, NONSTERILE	*	M/D=1189	A/C=D	COV	DCA
A4253	BLOOD GLUCOSE TEST OR REAGENT STRIPS FOR HOME BLOOD GLUCOSE MONITOR, PER 50 STRIPS	*	M/D=1189	A/C=C	COV=D	DCA
		*	CIM=60-11		F/D	RI
A4254	MEDICINE DROPPER (3) PER BOX	*	M/D=1189	A/C=D	COV	DCA
		*	XR1=A4649	XR2		XR3
A4255	TEST TUBES SET (3-6 TUBES)	*	M/D=1189	A/C=D	COV	DCA
		*	XR1=A4649	XR2		XR3
A4256	NORMAL, LOW AND HIGH CALIBRATOR SOLUTION / CHIPS	*	M/D=1184	A/C	COV	DCA
A4259	LANCETS, PER BOX	*	M/D=1189	A/C=F	COV=D	DCA
		*	CIM=60-11		F/D	RI
A4265	PARAFFIN	*	M/D=1185	A/C=A	COV	DCA
	VASCULAR CATHETERS	*				
	INCONTINENCE APPLIANCES AND CARE SUPPLIES	*	M/D=1189	A/C=A		DCA
A4300	IMPLANTABLE VASCULAR ACCESS PORTAL/CATHETER (VENOUS, ARTERIAL OR PERITONEAL)	*	M/D=1185	A/C	COV	DCA
		*	MCM	2130		
	INCONTINENCE APPLIANCES AND CARE SUPPLIES	*	M/D=1189	A/C	A	DCA
A4310	INSERTION TRAY WITHOUT DRAINAGE BAG AND WITHOUT CATHETER (ACCESSORIES ONLY)	*	M/D=1189	A/C=A	COV=D	DCA=90
		*	MCM	2130		
A4311	INSERTION TRAY WITHOUT DRAINAGE BAG WITH INDWELLING CATHETER, FOLEY TYPE, TWO-WAY LATEX WITH COATING (TEFLON, SILICONE, SILICONE ELASTOMER OR HYDROPHILIC, ETC.)	*	M/D=	890	A/C=A	COV=D
		*	MCM	2130		DCA=90
A4312	INSERTION TRAY WITHOUT DRAINAGE BAG WITH INDWELLING CATHETER, FOLEY TYPE, TWO-WAY, ALL SILICONE	*	M/D=1189	A/C=A	COV=D	DCA=90
		*	MCM	2130		
A4313	INSERTION TRAY WITHOUT DRAINAGE BAG WITH INDWELLING CATHETER, FOLEY TYPE, THREE-WAY, FOR CONTINUOUS IRRIGATION	*	M/D=1189	A/C=C	COV=D	DCA=90
		*	MCM	2130		
A4314	INSERTION TRAY WITH DRAINAGE BAG WITH INDWELLING CATHETER, FOLEY TYPE, TWO-WAY LATEX WITH COATING (TEFLON, SILICONE, SILICONE ELASTOMER OR HYDROPHILIC, ETC.)	*	M/D=1189	A/C=A	COV=D	DCA=90
		*	MCM	2130		

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A4315	INSERTION TRAY WITH DRAINAGE BAG WITH INDWELLING CATHETER, FOLEY TYPE, TWO-WAY, ALL SILICONE	M/D=1189 NCM 2130	A/C=A	COV=D	DCA=90
A4316	INSERTION TRAY WITH DRAINAGE BAG WITH INDWELLING CATHETER, FOLEY TYPE, THREE-WAY, FOR CONTINUOUS IRRIGATION	M/D=1189 NCM 2130	A/C=A	COV=D	DCA=90
A4320	IRRIGATION TRAY FOR BLADDER IRRIGATION WITH BULB OR PISTON SYRINGE	M/D=1189 NCM 2130	A/C=A	COV=D	DCA=90
A4322	IRRIGATION SYRINGE, BULB OR PISTON	M/D=1189 NCM 2130	A/C=A	COV=D	DCA=90
A4323	STERILE SALINE IRRIGATION SOLUTION, 1000 ML.	M/D=1189 NCM 2130	A/C=A	COV=D	DCA=90
A4326	MALE EXTERNAL CATHETER SPECIALTY TYPE, EQ; INFLATABLE, FACEPLATE, ETC., EACH	M/D=1189 NCM 2130	A/C=A	COV=D	DCA=90
A4327	FEMALE EXTERNAL URINARY COLLECTION DEVICE; MEATAL CUP, EACH	M/D=1189 NCM 2130	A/C=A	COV=D	DCA=90
A4328	FEMALE EXTERNAL URINARY COLLECTION DEVICE; POUCH, EACH	M/D=1189 NCM 2130	A/C=A	COV=D	DCA=90
A4329	EXTERNAL CATHETER STARTER SET, MALE/FEMALE, INCLUDES CATHETERS/URINARY COLLECTION DEVICE, BAG/POUCH AND ACCESSORIES (TUBING, CLAMPS, ETC.), 7 DAY SUPPLY	M/D=1189 NCM 2130	A/C=A	COV=D	DCA=90
A4330	PERIANAL FECAL COLLECTION POUCH WITH ADHESIVE	M/D=1189 NCM 2130	A/C=A	COV=D	DCA=90
A4335	INCONTINENCE SUPPLY; MISCELLANEOUS	M/D=1189 NCM 2130	A/C=A	COV=D	DCA=90
A4338	INDWELLING CATHETER; FOLEY TYPE, TWO-WAY LATEX WITH COATING (TEFLON, SILICONE, SILICONE ELASTOMER, OR HYDROPHILIC, ETC.)	M/D=1189 NCM 2130	A/C=A	COV=D	DCA=90
A4340	INDWELLING CATHETER; SPECIALTY TYPE, EQ; COUDE, MUSHROOM, WING, ETC.)	M/D=1189 NCM 2130	A/C=A	COV=D	DCA=90
A4341	INDWELLING CATHETER, FOLEY TYPE, TWO-WAY, TEFLON	M/D=1189 XR1=A4338 XR2	A/C=D	COV	DCA XR3
A4342	INDWELLING CATHETER, FOLEY TYPE, TWO-WAY, LATEX	M/D=1189 XR1=A4338 XR2	A/C=D	COV	DCA XR3
A4343	INDWELLING CATHETER, FOLEY TYPE, TWO-WAY, LATEX WITH TEFLON COATING	M/D=1189 XR1=A4338 XR2	A/C=D	COV	DCA XR3

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A4344 INDWELLING CATHETER, FOLEY TYPE, TWO-WAY, ALL SILICONE

A4345 INDWELLING CATHETER, FOLEY TYPE, TWO-WAY, SILICONE
WITH ELASTOMER COATING

A4346 INDWELLING CATHETER; FOLEY TYPE, THREE WAY FOR CONTINUOUS IRRIGATION

A4347 MALE EXTERNAL CATHETER WITH OR WITHOUT ADHESIVE, WITH OR WITHOUT ANTI-REFLUX
DEVICE; PER DOZEN

A4348 URINARY COLLECTION AND RETENTION SYSTEM, DRAINAGE BAG WITH TUBE

A4349 URINARY COLLECTION AND RETENTION SYSTEM, LEG BAG WITH TUBE

A4350 CATHETER CARE KIT

A4351 INTERMITTENT URINARY CATHETER; STRAIGHT TIP

A4352 INTERMITTENT URINARY CATHETER; COUDE (CURVED) TIP

A4353 CATHETER INSERTION TRAY WITH CATHETER INCLUDING TUBING AND DRAINAGE BAG

A4354 INSERTION TRAY WITH DRAINAGE BAG BUT WITHOUT CATHETER

A4355 IRRIGATION TUBING SET FOR CONTINUOUS BLADDER IRRIGATION THROUGH
A THREE-WAY INDWELLING FOLEY CATHETER

EXTERNAL URINARY SUPPLIES

A4356 EXTERNAL URETHRAL CLAMP OR COMPRESSION DEVICE (NOT TO BE USED FOR
CATHETER CLAMP)A4357 BEDSIDE DRAINAGE BAG, DAY OR NIGHT, WITH OR WITHOUT ANTI REFLUX
DEVICE, WITH OR WITHOUT TUBE

A4358 URINARY LEG BAG; VINYL, WITH OR WITHOUT TUBE

NOTE: (SEE DME SECTION E0325 AND E0326 FOR MALE AND FEMALE URINALS)

A4359 URINARY SUSPENSORY WITHOUT LEG BAG

M/D=1189 A/C=F COV=D DCA
NCH 2130AM/D=1189 A/C=D COV DCA
XR1=A4336 XR2 XR3M/D=1189 A/C=C COV=D DCA
NCH 2130M/D=1189 A/C=C COV=D DCA
NCH 2130M/D=1189 A/C=D COV DCA
XR1=A4357 XR2 XR3M/D=1189 A/C=D COV DCA
XR1=A4358 XR2 XR3

M/D=1189 A/C=D COV DCA

M/D=1189 A/C=A COV=D DCA=90
NCH 2130M/D=1189 A/C=A COV=D DCA=90
NCH 2130

M/D=1189 A/C=D COV DCA

M/D=1189 A/C=C COV=D DCA
NCH 2130M/D=1189 A/C=C COV=D DCA
NCH 2130M/D=1189 A/C=C COV=D DCA
NCH 2130M/D=1189 A/C=C COV=D DCA
NCH 2130

M/D=1189 A/C=C COV=D DCA

M/D=1189 A/C=C COV=D DCA
NCH 2130

OSTOMY SUPPLIES

A4360 COLOSTOMY SET

A4361 OSTOMY FACEPLATE

A4362 SKIN BARRIER; SOLID, 4 X 4 OR EQUIVALENT; EACH

A4363 SKIN BARRIER; LIQUID (SPRAY, BRUSH, ETC.) POWDER OR PASTE; PER OZ.

A4364 ADHESIVE FOR OSTOMY OR CATHETER; LIQUID (SPRAY, BRUSH, ETC.), CEMENT, POWDER OR PASTE; ANY COMPOSITION (E.G. SILICONE, LATEX, ETC); PER OZ.

A4365 OSTOMY BAG, DISPOSABLE/CLOSED

A4366 OSTOMY BAG, REUSEABLE OR DRAINABLE

A4367 OSTOMY BELT

A4368 STOMA WICKS

A4369 TAIL CLOSURES

A4370 OSTOMY SKIN BOND OR CEMENT, REMOVER

A4380 ILEOSTOMY SET

A4390 ILEAL BLADDER SET

A4397 IRRIGATION SUPPLY; SLEEVE

A4398 IRRIGATION SUPPLY; BAGS

A4399 IRRIGATION SUPPLY; CONE/CATHETER

A4400 OSTOMY IRRIGATION SET

M/D=1189 A/C=D COV DCA
CNTS RVU= BR A/V

M/D=1189 A/C=F COV=D DCA
NCM 2130A

M/D=1189 A/C=C COV=D DCA
NCM 2130

M/D=1189 A/C=C COV=D DCA
NCM 2130

M/D=1189 A/C=C COV=D DCA
NCM 2130

M/D=1189 A/C=D COV DCA

M/D=1189 A/C=D COV DCA

M/D=1189 A/C=F COV=D DCA
NCM 2130A

M/D=1189 A/C=D COV DCA

M/D=1189 A/C=D COV DCA

M/D=1188 A/C=D COV DCA
XR1=A4455 XR2 XR3

M/D=1189 A/C=D COV DCA
CNTS RVU= BR A/V

M/D=1189 A/C=D COV DCA
CNTS RVU= BR A/V

M/D=1189 A/C=A COV=D DCA=90
NCM 2130

M/D=1189 A/C=F COV=D DCA
NCM 2130A

M/D=1189 A/C=F COV=D DCA
NCM 2130A

M/D=1189 A/C=C COV=D DCA
CNTS RVU= BR A/V
NCM 2130

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HCFA COMMON PROCEDURE CODING SYSTEM

A4402 LUBRICANT

A4404 OSTOMY RINGS

A4421 OSTOMY SUPPLY; MISCELLANEOUS

URETEROSTOMY SUPPLIES

A4430 URETEROSTOMY SET

A4440 NOT OTHERWISE CLASSIFIED URETEROSTOMY SUPPLIES

A4450 ADHESIVE TAPE, ALL SIZES

A4453 MICROPOROUS TAPE, ALL SIZES

A4454 TAPE, ALL TYPES, ALL SIZES

A4455 ADHESIVE REMOVER OR SOLVENT (FOR TAPE, CEMENT OR OTHER ADHESIVE)

A4460 ELASTIC BANDAGE

A4470 GRAYLEE JET WASHER

A4480 VABRA ASPIRATOR

A4490 SURGICAL STOCKINGS ABOVE KNEE LENGTH, EACH

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* M/D=1189 A/C=C COV=D DCA
* MCM 2130
*
* M/D=1189 A/C=F COV=D DCA
* MCM 2130A
*
* M/D=1189 A/C=C COV=D DCA
* MCM 2130
*
*
*
* M/D=1189 A/C=D COV DCA
* CNTS RVU= BR A/V
*
* M/D=1189 A/C=D COV DCA
* XR1=A4421 XR2 XR3
* CNTS RVU= BR A/V
*
* M/D=1188 A/C=D COV DCA
* XR1=A4454 XR2 XR3
* CNTS RVU= BR A/V
*
* M/D=1188 A/C=D COV DCA
* XR1=A4454 XR2 XR3
*
* M/D=1189 A/C=F COV=D DCA
* MCM 2130
*
* M/D=1189 A/C=F COV=D DCA
* MCM 2130
*
* M/D=1189 A/C=C COV DCA
* CNTS RVU= BR A/V
* MCM 2050.4
*
* M/D=1188 A/C=E COV=D DCA
* CNTS RVU= BR A/V
* CIN=50-4 F/D RI
*
* M/D=1188 A/C=E COV=D DCA
* CNTS RVU= BR A/V
* CIN=50-10 F/D RI
*
* M/D=1189 A/C=F COV=M DCA
* CNTS RVU= BR A/V
* CIN=60-9 F/D RI
* MCM 2133

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HCFA COMMON PROCEDURE CODING SYSTEM

A4495 SURGICAL STOCKINGS THIGH LENGTH, EACH

A4500 SURGICAL STOCKINGS BELOW KNEE LENGTH, EACH

A4510 SURGICAL STOCKINGS FULL LENGTH, EACH

A4550 SURGICAL TRAYS

A4554 DISPOSABLE UNDERPADS, ALL SIZES, (E.G., CHUX'S)

A4555 PRIMARY SURGICAL DRESSING KIT, (E.G., STERILE DRESSINGS, PADS, ETC.)

A4556 ELECTRODES, (E.G., APNEA MONITOR)

A4557 LEAD WIRES, (E.G., APNEA MONITOR)

A4558 CONDUCTIVE PASTE OR GEL

A4560 PESSARY

A4565 SLINGS

A4570 SPLINT

A4572 RIB BELT

A4580 CAST SUPPLIES

A4581 SUPPLIES RISER JACKET

A4590 SPECIAL CASTING MATERIALS, HEXCELITE AND LIGHT CAST

*	M/D=1189	A/C=F	COV=M	DCA
*	CNTS	RVU=	BR	A/V
*	CIM=60-9		F/D	RI
*	MCM 2133			
*				
*	M/D=1189	A/C=F	COV=M	DCA
*	CNTS	RVU=	BR	A/V
*	CIM=60-9		F/D	RI
*	MCM 2133			
*				
*	M/D=1181	A/C	COV	DCA
*	CNTS	RVU=	BR	A/V
*				
*	M/D=1188	A/C=E	COV=M	DCA
*	CIM=60-9		F/D	RI
*				
*	M/D=1189	A/C=F	COV=D	DCA
*	CNTS	RVU=	BR	A/V
*	MCM 2079			
*				
*	M/D=1185	A/C=C	COV	DCA
*				
*	M/D=1185	A/C=C	COV	DCA
*				
*	M/D=1184	A/C	COV	DCA
*				
*	M/D=1181	A/C	COV	DCA
*	CNTS	RVU=	BR	A/V
*				
*	M/D=1182	A/C	COV	DCA
*				
*	M/D=1189	A/C=F	COV=D	DCA
*	CNTS	RVU=	BR	A/V
*	MCM 2079			
*				
*	M/D=1181	A/C	COV	DCA
*				
*	M/D=1189	A/C=F	COV=D	DCA
*	CNTS	RVU=	BR	A/V
*	MCM 2079			
*				
*	M/D=1181	A/C	COV	DCA
*				
*	M/D=1185	A/C=C	COV	DCA
*	CNTS	RVU=	BR	A/V
*				

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SUPPLIES FOR DURABLE MEDICAL EQUIPMENT (E0400 - E0606)

A4610 MEDICATION SUPPLIES TO BE USED IN DURABLE MEDICAL EQUIPMENT,
PRESCRIBED BY A PHYSICIAN

A4611 BATTERY, HEAVY DUTY; REPLACEMENT FOR PATIENT OWNED VENTILATOR

A4612 BATTERY CABLES; REPLACEMENT FOR PATIENT-OWNED VENTILATOR

A4613 BATTERY CHARGER; REPLACEMENT FOR PATIENT-OWNED VENTILATOR

A4615 CANNULA, NASAL

A4616 TUBING, UNSPECIFIED LENGTH

A4617 MOUTH PIECE

A4618 BREATHING CIRCUITS

A4619 FACE TENT

A4620 VARIABLE CONCENTRATION MASK

A4621 TRACHEOTOMY MASK OR COLLAR

A4622 TRACHEOSTOMY OR LARYNGECTOMY TUBE

A4623 TRACHEOSTOMY, INNER CANNULA (REPLACEMENT ONLY)

HCFA COMMON PROCEDURE CODING SYSTEM

M/D=1189	A/C=A	DCA
M/D=1189	A/C=A COV=D	DCA
CNTS	RVU=	BR A/V
MCM	2100.5	
M/D=1189	A/C=A COV=D	DCA=90
CIM=60-4	F/D	RI
M/D=1189	A/C=A COV=D	DCA=90
CIM=60-9	F/D	RI
M/D=1189	A/C=A COV=D	DCA=90
CIM=60-4	F/D	RI
M/D=1189	A/C=A COV=D	DCA=90
CIM=60-4	F/D	RI
MCM	4107.9	
M/D=1189	A/C=A COV=D	DCA=90
CIM=60-4	F/D	RI
MCM	4107.9	
M/D=1189	A/C=A COV=D	DCA=90
CIM=60-4	F/D	RI
MCM	4107.9	
M/D=1189	A/C=A COV=D	DCA=90
CIM=60-4	F/D	RI
MCM	4107.9	
M/D=1189	A/C=A COV=D	DCA=90
CIM=60-4	F/D	RI
MCM	4107.9	
M/D=1189	A/C=A COV=D	DCA=90
CIM=60-4	F/D	RI
MCM	4107.9	
M/D=1189	A/C=A COV=D	DCA=90
CIM=65-16	F/D	RI
M/D=1189	A/C=A COV=D	DCA=90
CIM=65-16	F/D	RI

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HCFA COMMON PROCEDURE CODING SYSTEM

A4624 TRACHEAL SUCTION CATHETER, ANY TYPE, EACH

A4625 TRACHEOSTOMY CARE OR CLEANING STARTER KIT

A4626 TRACHEOSTOMY CLEANING BRUSH, EACH

SUPPLIES FOR RADIOLOGICAL PROCEDURES

A4647 SUPPLY OF PARAMAGNETIC CONTRAST MATERIAL, EG., GADOLINIUM

A4648 SUPPLY OF LOW OSMOLAR CONTRAST MATERIAL (NON-IONIC)

A4649 SURGICAL SUPPLY; MISCELLANEOUS

SUPPLIES FOR ESRD

NOTE: FOR DME ITEMS FOR ESRD SEE PROCEDURE CODES E1510-E1699.
FOR DIALYSIS PROCEDURES, SEE M0900-M0999.A4650 CENTRIFUGE (INCLUDES CALIBRATED MICROCAPILLARY
TUBES AND SEALEASE)

A4655 NEEDLES AND SYRINGES FOR DIALYSIS

A4660 SPHYGMOMANOMETER/BLOOD PRESSURE APPARATUS WITH
CUFF AND STETHOSCOPE

A4663 BLOOD PRESSURE CUFF ONLY

A4670 AUTOMATIC BLOOD PRESSURE MONITOR

A4680 ACTIVATED CARBON FILTERS FOR DIALYSIS

M/D=1189 A/C=A COV=D DCA=90
CIM=60-4 60-9 F/D RI
NCM 2180DM/D=1189 A/C=A COV=D DCA=90
NCM 2130M/D=1189 A/C=A COV DCA=90
CIM=60-4 60-9 F/D RI
NCM 2130D

M/D=1189 A/C=A DCA

M/D=1189 A/C=A COV=D DCA=90
CIM=50-13 F/D RI

M/D=1189 A/C=A COV DCA=90

M/D=1189 A/C=C COV DCA
CNTS RVU= BR A/VM/D=1188 A/C=C COV=D DCA
CNTS RVU= 12.30 A/V
CIM=60-1 F/D RIM/D=1188 A/C=C COV=D DCA
CIM=60-1 F/D RIM/D=1188 A/C=C COV=D DCA
CNTS RVU= 5.00 A/V
CIM=60-1 F/D RIM/D=1188 A/C=C COV=D DCA
CNTS RVU= BR A/V
CIM=60-1 F/D RIM/D=1188 A/C=C COV=D DCA
CNTS RVU= 10.00 A/V
CIM=60-1 F/D RIM/D=1188 A/C=C COV=D DCA
CNTS RVU= 2.00 A/V
CIM=60-1 F/D RI

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HCFA COMMON PROCEDURE CODING SYSTEM

A4690 DIALYZERS (ARTIFICIAL KIDNEYS) ALL BRANDS, ALL SIZES PER UNIT

M/D=1188 A/C=C COV=D DCA
 CNTS RVU= 26.60 A/V
 CIM=60-1 F/D RI

A4700 STANDARD DIALYSATE SOLUTION, EACH

M/D=1188 A/C=C COV=D DCA
 CNTS RVU= 2.00 A/V
 CIM=60-1 F/D RI

A4705 BICARBONATE DIALYSATE SOLUTION, EACH

M/D=1188 A/C=C COV=D DCA
 CNTS RVU= F/D RI

A4712 WATER, STERILE

M/D=1188 A/C=C COV=D DCA
 CNTS RVU= BR A/V
 CIM=60-1 F/D RI

A4714 TREATED WATER (DEIONIZED, DISTILLED, REVERSE OSMOSIS)
FOR USE IN DIALYSIS SYSTEM

M/D=1188 A/C=C COV=D DCA
 CIM=60-1 F/D RI

A4730 FISTULA CANNULATION SET FOR DIALYSIS ONLY

M/D=1188 A/C=C COV=D DCA
 CNTS RVU= 4.66 A/V
 CIM=60-1 F/D RI

A4735 LOCAL/TOPICAL ANESTHETICS FOR DIALYSIS ONLY

M/D=1188 A/C=C COV=D DCA
 CNTS RVU= BR A/V
 CIM=60-1 F/D RI

A4740 SHUNT ACCESSORIES FOR DIALYSIS ONLY

M/D=1188 A/C=C COV=D DCA
 CNTS RVU= 2.00 A/V
 CIM=60-1 F/D RI

A4750 BLOOD TUBING, ARTERIAL OR VENOUS, EACH

M/D=1188 A/C=C COV=D DCA
 CNTS RVU= 6.00 A/V
 CIM=60-1 F/D RI

A4755 BLOOD TUBING, ARTERIAL AND VENOUS COMBINED

M/D=1188 A/C=C COV=D DCA
 CIM=60-1 F/D RI

A4760 DIALYSATE STANDARD TESTING SOLUTION, SUPPLIES

M/D=1188 A/C=C COV=D DCA
 CNTS RVU= 1.60 A/V
 CIM=60-1 F/D RI

A4765 DIALYSATE CONCENTRATE ADDITIVES, EACH

M/D=1188 A/C=C COV=D DCA
 CIM=60-1 F/D RI

A4770 BLOOD TESTING SUPPLIES (E.G. VACUTAINERS AND TUBES)

M/D=1188 A/C=C COV=D DCA
 CNTS RVU= 1.60 A/V
 CIM=60-1 F/D RI

A4771 SERUM CLOTTING TIME TUBE, PER BOX

M/D=1188 A/C=C COV=D DCA
 CIM=60-1 F/D RI

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HCFA COMMON PROCEDURE CODING SYSTEM

A4772 DEXTROSTICK OR GLUCOSE TEST STRIPS, PER BOX

A4773 HEMAOSTIX, PER BOTTLE

A4774 AMMONIA TEST PAPER, PER BOX

A4780 STERILIZING AGENT FOR DIALYSIS EQUIPMENT, PER GALLON

A4790 CLEANSING AGENTS FOR EQUIPMENT FOR DIALYSIS ONLY

A4800 HEPARIN FOR DIALYSIS AND ANTIDOTE, ANY STRENGTH, PORCINE OR
BEEF, UP TO 1000 UNITS, 10-30 ML (FOR PARENTERAL USE SEE B4188, B4192,
B4196, B4198 AND B4216)

A4820 HEMODIALYSIS KIT SUPPLIES

A4850 HEMOSTATS WITH RUBBER TIPS FOR DIALYSIS

A4860 DISPOSABLE CATHETER CAPS

A4870 PLUMBING AND/OR ELECTRICAL WORK FOR HOME DIALYSIS EQUIPMENT

A4880 STORAGE TANKS UTILIZED IN CONNECTION WITH WATER
PURIFICATION SYSTEM, REPLACEMENT TANKS FOR DIALYSISA4890 CONTRACTS, REPAIR AND MAINTENANCE, FOR HOME DIALYSIS
EQUIPMENT (NON-COVERED)A4900 CONTINUOUS AMBULATORY PERITONEAL DIALYSIS (CAPD) SUPPLY KIT
SUPPLY KIT

*	M/D=1189	A/C=F	COV=D	DCA
*	CIM=60-11		F/D	RI
*	M/D=1189	A/C=F	COV=D	DCA
*	CIM=60-11		F/D	RI
*	M/D=1188	A/C=C	COV=D	DCA
*	CIM=60-1		F/D	RI
*	M/D=1188	A/C=C	COV=D	DCA
*	CNTS	RVU=	2.00	A/V
*	CIM=60-1		F/D	RI
*	M/D=1188	A/C=C	COV=D	DCA
*	CNTS	RVU=	1.00	A/V
*	CIM=60-1		F/D	RI
*	M/D=1188	A/C=C	COV=D	DCA
*	CNTS	RVU=	3.66	A/V
*	CIM=60-1		F/D	RI
*	M/D=1188	A/C=C	COV=D	DCA
*	CNTS	RVU=	93.30	A/V
*	CIM=60-1		F/D	RI
*	M/D=1188	A/C=C	COV=D	DCA
*	CNTS	RVU=	1.40	A/V
*	CIM=60-1		F/D	RI
*	M/D=1188	A/C=C	COV=D	DCA
*	CNTS	RVU=	2.00	A/V
*	CIM=60-1		F/D	RI
*	M/D=1188	A/C=C	COV=D	DCA
*	XR4	XR5	IC=R	SLHA
*	CNTS	RVU=	RNE	A/V
*	CIM=60-1		F/D	RI
*	M/D=1188	A/C=C	COV=D	DCA
*	CNTS	RVU=	13.30	A/V
*	CIM=60-1		F/D	RI
*	M/D=1189	A/C=F	COV=M	DCA
*	CNTS	RVU=	RNE	A/V
*	NCM	2100.4		
*	M/D=1188	A/C=C	COV=D	DCA
*	CNTS	RVU=	RNE	A/V
*	CIM=60-1		F/D	RI

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HCFA COMMON PROCEDURE CODING SYSTEM

A4901 CONTINUOUS CYCLING PERITONEAL DIALYSIS (CCPD) SUPPLY KIT

A4905 INTERMITTENT PERITONEAL DIALYSIS (IPD) SUPPLY KIT

A4910 NON-MEDICAL SUPPLIES FOR DIALYSIS, (I.E., SCALE, SCISSORS, STOPWATCH, ETC.)

NOTE: THE ABOVE PROCEDURE (A4910) 'NON-MEDICAL SUPPLIES'
INCLUDES THE FOLLOWING:SCALE
SCISSORS
STOPWATCH
SURGICAL BRUSH
THERMOMETER
TOOL KIT
TOURNIQUET
TUBE OCCLUDING FORCEPS/CLAMPS

A4912 GOMCO DRAIN BOTTLE

A4913 MISCELLANEOUS DIALYSIS SUPPLIES, NOT IDENTIFIED ELSEWHERE, BY REPORT

A4914 PREPARATION KITS

A4918 VENOUS PRESSURE CLAMPS, EACH

A4919 DIALYZER HOLDER, EACH

A4920 HARVARD PRESSURE CLAMP, EACH

A4921 MEASURING CYLINDER, ANY SIZE, EACH

A4927 GLOVES, STERILE OR NON-STERILE, PER PAIR

ADDITIONAL OSTOMY SUPPLIES

M/D=1188 A/C=C COV=D DCA
CIM=60-1 F/D RIM/D=1188 A/C=C COV=D DCA
CIM=60-1 F/D RIM/D=1188 A/C=E COV=D DCA
CNTS RVU= 10.40 A/V
CIM=60-1 F/D RIM/D=1188 A/C=C COV=D DCA
CNTS RVU= 2.00 A/V
CIM=60-1 F/D RIM/D=1188 A/C=C COV=D DCA
CIM=60-1 F/D RIM/D=1188 A/C=C COV=D DCA
CNTS RVU= 2.00 A/V
CIM=60-1 F/D RIM/D=1188 A/C=C COV=D DCA
CIM=60-1 F/D RIM/D=1188 A/C=C COV=D DCA
CIM=60-1 F/D RIM/D=1188 A/C=C COV=D DCA
CIM=60-1 F/D RIM/D=1188 A/C=C COV=D DCA
CIM=60-1 F/D RIM/D=1188 A/C=C COV=D DCA
CIM=60-1 F/D RI

M/D=1189 A/C=A DCA

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HCFA COMMON PROCEDURE CODING SYSTEM

A5051	POUCH, CLOSED; WITH BARRIER ATTACHED (1 PIECE)	M/D=1189 A/C=A COV=D DCA=90 NCM 2130
A5052	POUCH, CLOSED; WITHOUT BARRIER ATTACHED (1 PIECE)	M/D=1189 A/C=A COV=D DCA=90 NCM 2130
A5053	POUCH, CLOSED; FOR USE ON FACEPLATE	M/D=1189 A/C=A COV=D DCA=90 NCM 2130
A5054	POUCH, CLOSED; FOR USE ON BARRIER WITH FLANGE (2 PIECE)	M/D=1189 A/C=A COV=D DCA=90 NCM 2130
A5055	STOMA CAP	M/D=1189 A/C=A COV=D DCA=90 NCM 2130
A5061	POUCH, DRAINABLE; WITH BARRIER ATTACHED (1 PIECE)	M/D=1189 A/C=A COV=D DCA=90 NCM 2130
A5062	POUCH, DRAINABLE; WITHOUT BARRIER ATTACHED (1 PIECE)	M/D=1189 A/C=A COV=D DCA=90 NCM 2130
A5063	POUCH, DRAINABLE; FOR USE ON BARRIER WITH FLANGE (2 PIECE SYSTEM)	M/D=1189 A/C=A COV=D DCA=90 NCM 2130
A5064	POUCH, DRAINABLE; WITH FACEPLATE ATTACHED; PLASTIC OR RUBBER	M/D=1189 A/C=A COV=D DCA=90 NCM 2130
A5065	POUCH, DRAINABLE; FOR USE ON FACEPLATE; PLASTIC OR RUBBER	M/D=1189 A/C=A COV=D DCA=90 NCM 2130
A5071	POUCH, URINARY; WITH BARRIER ATTACHED (1 PIECE)	M/D=1189 A/C=A COV=D DCA=90 NCM 2130
A5072	POUCH, URINARY; WITHOUT BARRIER ATTACHED (1 PIECE)	M/D=1189 A/C=A COV=D DCA=90 NCM 2130
A5073	POUCH, URINARY; FOR USE ON BARRIER WITH FLANGE (2 PIECE)	M/D=1189 A/C=A COV=D DCA=90 NCM 2130
A5074	POUCH, URINARY; WITH FACEPLATE ATTACHED; PLASTIC OR RUBBER	M/D=1189 A/C=A COV=D DCA=90 NCM 2130
A5075	POUCH, URINARY; FOR USE ON FACEPLATE; PLASTIC OR RUBBER	M/D= 890 A/C=A COV=D DCA=90 NCM 2130
A5081	CONTINENT DEVICE; PLUG FOR CONTINENT STOMA	M/D=1189 A/C=A COV=D DCA=90 NCM 2130
A5082	CONTINENT DEVICE; CATHETER FOR CONTINENT STOMA	M/D=1189 A/C=A COV=D DCA=90 NCM 2130

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HCFA COMMON PROCEDURE CODING SYSTEM

A5093 OSTOMY ACCESSORY; CONVEX INSERT

M/D=1189 A/C=A COV=D DCA=90
MCM 2130

ADDITIONAL INCONTINENCE APPLIANCES/SUPPLIES

M/D=1189 A/C=A DCA

A5102 BEDSIDE DRAINAGE BOTTLE, RIGID OR EXPANDABLE

M/D=1189 A/C=A COV=D DCA=90
MCM 2130

A5105 URINARY SUSPENSORY; WITH LEG BAG, WITH OR WITHOUT TUBE

M/D=1189 A/C=A COV=D DCA=90
MCM 2130

A5112 URINARY LEG BAG; LATEX

M/D=1189 A/C=A COV=D DCA=90
MCM 2130

A5113 LEG STRAP; LATEX, PER SET

M/D=1189 A/C=A COV=D DCA=90
MCM 2130

A5114 LEG STRAP; FOAM OR FABRIC, PER SET

M/D=1189 A/C=A COV=D DCA=90
MCM 2130

SUPPLIES FOR EITHER INCONTINENCE OR OSTOMY APPLIANCES

M/D=1189 A/C=A DCA

A5119 SKIN BARRIER; WIPES, BOX PER 50

M/D=1189 A/C=A COV=D DCA=90
MCM 2130

A5121 SKIN BARRIER; SOLID, 6 X 6 OR EQUIVALENT, EACH

M/D=1189 A/C=A COV=D DCA=90
MCM 2130

A5122 SKIN BARRIER; SOLID, 8 X 8 OR EQUIVALENT, EACH

M/D=1189 A/C=A COV=D DCA=90
MCM 2130

A5123 SKIN BARRIER; WITH FLANGE (SOLID, FLEXIBLE OR ACCORDIAN), ANY SIZE, EACH

M/D=1189 A/C=A COV=D DCA=90
MCM 2130

A5126 ADHESIVE; DISC OR FOAM PAD

M/D=1189 A/C=A COV=D DCA=90
MCM 2130

A5131 APPLIANCE CLEANER, INCONTINENCE AND OSTOMY APPLIANCES, PER 16 OZ.

M/D=1189 A/C=A COV=D DCA=90
MCM 2130

A5149 INCONTINENCE/OSTOMY SUPPLY; MISCELLANEOUS

M/D=1189 A/C=A COV=D DCA=90
MCM 2130

MISCELLANEOUS AND EXPERIMENTAL A9000 - A9999

A9150 NON-PRESCRIPTION DRUGS

M/D=1188 A/C=C COV=S DCA

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A9160 NON-COVERED SVC. BY PODIATRIST
A9170 NON-COVERED SVC. BY CHIROPRACTOR
A9180 NATUROPATHS
A9190 PERSONAL ITEMS
A9250 NURSING HOME RENTALS
A9260 NON-CERTIFIED PHYSICAL THERAPISTS
A9270 NON COVERED PROCEDURE
A9280 REIMBURSEMENT INCLUDED IN THE BASIC ALLOWANCE OF ANOTHER
PROCEDURE
A9290 DESCRIPTION OF SERVICE DOES NOT INDICATE HOSPITAL VISIT.

HCFA COMMON PROCEDURE CODING SYSTEM

* M/D=1188 A/C=C COV=S DCA
*
* M/D=1188 A/C=C COV=S DCA
*
* M/D=1188 A/C=C COV=S DCA
*
* M/D=1188 A/C=C COV=S DCA
*
* M/D=1188 A/C=C COV DCA
*
* M/D=1188 A/C=C COV DCA
*
* M/D=1188 A/C=C COV DCA
*
* M/D=1188 A/C=C COV DCA
*
* M/D=1188 A/C=C COV DCA

ENTERAL AND PARENTERAL THERAPY (B4000 - B9999)

ENTERAL FORMULAE AND ENTERAL MEDICAL SUPPLIES

B4034	ENTERAL FEEDING SUPPLY KIT;-SYRINGE (MONTHLY)	M/D=1185 A/C=A COV	DCA
B4035	ENTERAL FEEDING SUPPLY KIT;- PUMP FED (MONTHLY)	M/D=1185 A/C=A COV	DCA
B4036	ENTERAL FEEDING SUPPLY KIT; GRAVITY FED (MONTHLY)	M/D=1185 A/C=A COV	DCA
B4081	NASOGASTRIC TUBING WITH STYLET	M/D=1187 A/C=E COV	DCA
B4082	NASOGASTRIC TUBING WITHOUT STYLET	M/D=1185 A/C=A COV	DCA
B4083	STOMACH TUBE - LEVINE TYPE	M/D=1185 A/C=A COV	DCA
B4084	GASTROSTOMY/JEJUNOSTOMY TUBING	M/D=1187 A/C=A COV	DCA
B4099	ENTERAL SUPPLY KIT FOR PREPACKAGED DELIVERY SYSTEM (MONTHLY)	M/D=1187 A/C=D COV	DCA
B4150	ENTERAL FORMULAE; CATEGORY I; SEMI-SYNTHETIC INTACT PROTEIN/PROTEIN ISOLATES (E.G., ENRICH, ENSURE, ENSURE HN, ENSURE POWDER, ISOCAL, LONALAC POWDER, MERITENE, MERITENE POWDER, OSMOLITE, OSMOLITE HN, PORTAGEN POWDER, SUSTACAL, RENU, SUSTAGEN POWDER, TRAVASORB) 100 CALORIES = 1 UNIT	M/D=1187 A/C=C COV	DCA
B4151	ENTERAL FORMULAE; CATEGORY I: NATURAL INTACT PROTEIN/PROTEIN ISOLATES (E.G., COMPLEAT B, VITANEED, COMPLEAT B MODIFIED) 100 CALORIES= 1 UNIT	M/D=1187 A/C=C COV	DCA
B4152	ENTERAL FORMULAE; CATEGORY II: INTACT PROTEIN/PROTEIN ISOLATES (CALORICALLY DENSE) (E.G., MAGNACAL, ISOCAL HCN, SUSTACAL HC, ENSURE PLUS, ENSURE PLUS HN) 100 CALORIES = 1 UNIT	M/D=1185 A/C=C COV	DCA
B4153	ENTERAL FORMULAE; CATEGORY III: HYDROLIZED PROTEIN/AMINO ACIDS (E.G., CRITICARE HN, VIVONEX T.E.N. (TOTAL ENTERAL NUTRITION), VIVONEX HN, VITAL (VITAL HN), TRAVASORB HN, ISOTEIN HN, PRECISION HN, PRECISION ISOTONIC) 100 CALORIES = 1 UNIT	M/D=1187 A/C=C COV	DCA
B4154	ENTERAL FORMULAE; CATEGORY IV: DEFINED FORMULA FOR SPECIAL METABOLIC NEED, (E.G., HEPATIC-AID, TRAVASORB HEPATIC, TRAVASORB MCT, TRAVASORB RENAL, TRAUM-AID, TRAMACAL, AMINAID) 100 CALORIES = 1 UNIT	M/D=1185 A/C=C COV	DCA
B4155	ENTERAL FORMULAE; CATEGORY V: MODULAR COMPONENTS (PROTEIN, CARBOHYDRATES, FAT) (E.G., PROPAC, GERVAL PROTEIN, PROMIX, CASEC, MODUCAL, CONTROLYTE, POLYCOSE LIQUID OR POWDER, SUMACAL, MICROLIPIDS, MCT OIL, NUTRI-SOURCE) 100 CALORIES = 1 UNIT	M/D=1187 A/C=C COV	DCA

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B4156	ENTERAL FORMULAE; CATEGORY VI: STANDARDIZED NUTRIENTS (VIVONEX STD., TRAVASORB STD. PRECISION LR AND TOLEREK) 100 CALORIES = 1 UNIT	M/D=1187 A/C=C COV	DCA
B4157	ENTERAL FORMULAE; PREPACKAGED DELIVERY SYSTEM AND FORMULA (E.G., ENTRITION, OSMOLITE) 100 CALORIES = 1 UNIT	M/D=1187 A/C=D COV	DCA
	NOTE: (SEE J7060, J7070, J7042 FOR SOLUTION CODES FOR OTHER THAN PARENTERAL NUTRITION THERAPY USE)		
B4164	PARENTERAL NUTRITION SOLUTION: CARBOHYDRATES (DEXTROSE), 50% OR LESS (500 ML = 1 UNIT) - HOMEMIX	M/D=1187 A/C=C COV	DCA
B4168	PARENTERAL NUTRITION SOLUTION; AMINO ACID, 3.5%, (500 ML = 1 UNIT) - HOMEMIX	M/D=1185 A/C=C COV	DCA
B4172	PARENTERAL NUTRITION SOLUTION; AMINO ACID, 5.5% THROUGH 7%, (500 ML = 1 UNIT) - HOMEMIX	M/D=1185 A/C=C COV	DCA
B4176	PARENTERAL NUTRITION SOLUTION; AMINO ACID, 7% THROUGH 8.5%, (500 ML = 1 UNIT) - HOMEMIX	M/D=1187 A/C=C COV	DCA
B4178	PARENTERAL NUTRITION SOLUTION; AMINO ACID, GREATER THAN 8.5% (500 ML = 1 UNIT) - HOMEMIX	M/D=1187 A/C=A COV	DCA
B4180	PARENTERAL NUTRITION SOLUTION; CARBOHYDRATES (DEXTROSE), GREATER THAN 50% (500 ML=1 UNIT) - HOMEMIX	M/D=1187 A/C=C COV	DCA
B4184	PARENTERAL NUTRITION SOLUTION; LIPIDS, 10% WITH ADMINISTRATION SET (500 ML = 1 UNIT)	M/D=1185 A/C=C COV	DCA
B4186	PARENTERAL NUTRITION SOLUTION, LIPIDS, 20% WITH ADMINISTRATION SET (500 ML = 1 UNIT)	M/D=1185 A/C=A COV	DCA
B4188	PARENTERAL NUTRITION SOLUTION; COMPOUNDED AMINO ACID AND CARBOHYDRATE W/ELECTROLYTES, TRACE ELEMENTS, VITAMINS AND HEPARIN, ANY STRENGTH, (PER 1000 ML) - PREMIX	M/D=1187 A/C=D COV	DCA
B4189	PARENTERAL NUTRITION SOLUTION; COMPOUNDED AMINO ACID AND CARBOHYDRATES WITH ELECTROLYTES, TRACE ELEMENTS, AND VITAMINS, INCLUDING PREPARATION, ANY STRENGTH, 10 TO 51 GRAMS OF PROTEIN - PREMIX	M/D=1187 A/C=A COV	DCA
B4192	PARENTERAL NUTRITION SOLUTION; COMPOUNDED AMINO ACID AND CARBOHYDRATES WITH ELECTROLYTES, TRACE ELEMENTS, HEPARIN AND VITAMINS, ANY STRENGTH, PER 2000 ML - PREMIX	M/D=1187 A/C=D COV	DCA
B4193	PARENTERAL NUTRITION SOLUTION; COMPOUNDED AMINO ACID AND CARBOHYDRATES WITH ELECTROLYTES, TRACE ELEMENTS, AND VITAMINS, INCLUDING PREPARATION, ANY STRENGTH, 52 TO 73 GRAMS OF PROTEIN - PREMIX	M/D=1187 A/C=A COV	DCA

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84196	PARENTERAL NUTRITION SOLUTION; COMPOUNDED AMINO ACID AND CARBOHYDRATES WITH ELECTROLYTES, TRACE ELEMENTS, HEPARIN AND VITAMINS, ANY STRENGTH, PER 3000 ML - PREMIX	*	M/D=1187 A/C=D COV	DCA
84197	PARENTERAL NUTRITION SOLUTION; COMPOUNDED AMINO ACID AND CARBOHYDRATES WITH ELECTROLYTES, TRACE ELEMENTS AND VITAMINS, INCLUDING PREPARATION, ANY STRENGTH, 74 TO 100 GRAMS OF PROTEIN - PREMIX	*	M/D=1187 A/C=A COV	DCA
84198	PARENTERAL NUTRITION SOLUTION; COMPOUNDED AMINO ACID AND CARBOHYDRATES WITH ELECTROLYTES, TRACE ELEMENTS, HEPARIN AND VITAMINS, ANY STRENGTH, OVER 3000 ML - PREMIX	*	M/D=1187 A/C=D COV	DCA
84199	PARENTERAL NUTRITION SOLUTION; COMPOUNDED AMINO ACID AND CARBOHYDRATES WITH ELECTROLYTES, TRACE ELEMENTS AND VITAMINS, INCLUDING PREPARATION, ANY STRENGTH, OVER 100 GRAMS OF PROTEIN - PREMIX	*	M/D=1187 A/C=A COV	DCA
84216	PARENTERAL NUTRITION; ADDITIVES (VITAMINS, TRACE ELEMENTS, HEPARIN, ELECTROLYTES) HOMEMIX PER DAY	*	M/D=1185 A/C=C COV	DCA
84220	PARENTERAL NUTRITION SUPPLY KIT FOR 1 MONTH - PREMIX	*	M/D=1185 A/C=C COV	DCA
84222	PARENTERAL NUTRITION SUPPLY KIT FOR 1 MONTH - HOMEMIX	*	M/D=1185 A/C=A COV	DCA
84224	PARENTERAL NUTRITION ADMINISTRATION KIT FOR 1 MONTH	*	M/D=1187 A/C=E COV	DCA
84514	PARENTERAL NUTRITION SOLUTION; COMPOUNDED AMINO ACID AND CARBOHYDRATES, WITH ELECTROLYTES, HEPARIN, TRACE ELEMENTS, AND VITAMINS ANY STRENGTH - 1500 MILLILITERS - PREMIX	*	M/D=1187 A/C=D COV	DCA
85000	PARENTERAL NUTRITION SOLUTION; COMPOUNDED AMINO ACID AND CARBOHYDRATES WITH ELECTROLYTES, TRACE ELEMENTS, AND VITAMINS, INCLUDING PREPARATION, ANY STRENGTH, RENAL - AMIROSYN RF, NEPHRAMINE, RENAMINE - PREMIX	*	M/D=1187 A/C=A COV	DCA
85100	PARENTERAL NUTRITION SOLUTION; COMPOUNDED AMINO ACID AND CARBOHYDRATES WITH ELECTROLYTES, TRACE ELEMENTS, AND VITAMINS, INCLUDING PREPARATION, ANY STRENGTH, HEPATIC - FREAMINE HBC, HEPATAMINE - PREMIX	*	M/D=1187 A/C=A COV	DCA
85200	PARENTERAL NUTRITION SOLUTION; COMPOUNDED AMINO ACID AND CARBOHYDRATES WITH ELECTROLYTES, TRACE ELEMENTS, AND VITAMINS, INCLUDING PREPARATION, ANY STRENGTH, STRESS - BRANCH CHAIN AMINO ACIDS - PREMIX	*	M/D=1187 A/C=A COV	DCA
	ENTERAL AND PARENTERAL PUMPS	*	M/D=1189 A/C=F	DCA
89000	ENTERAL NUTRTION INFUSION PUMP - WITHOUT ALARM	*	M/D=1189 A/C=F COV=D CIN=65-10 F/D	DCA RI
89002	ENTERAL NUTRITION INFUSION PUMP - WITH ALARM	*	M/D=1189 A/C=F COV=D CIN=65-10 F/D	DCA RI

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B9004 PARENTERAL NUTRITION INFUSION PUMP, PORTABLE
 B9006 PARENTERAL NUTRITION INFUSION PUMP, STATIONARY
 B9998 NDC FOR EXTERNAL SUPPLIES
 B9999 NDC FOR PARENTERAL SUPPLIES

HCFA COMMON PROCEDURE CODING SYSTEM

•	M/D=1189	A/C=F	COV=D	DCA
•	CIM=65-10		F/D	RI
•				
•	M/D=1189	A/C=F	COV=D	DCA
•	CIM=65-10		F/D	RI
•				
•	M/D=1184	A/C	COV	DCA
•				
•	M/D=1184	A/C	COV	DCA

DENTAL PROCEDURES

D0100-D0999 I.DIAGNOSTIC

CLINICAL ORAL EXAMINATIONS

D0110 INITIAL ORAL EXAMINATION

D0120 PERIODIC ORAL EXAMINATION

D0130 EMERGENCY ORAL EXAMINATION

RADIOGRAPHS

D0210 INTRAORAL - COMPLETE SERIES (INCLUDING BITEWINGS)

D0220 INTRAORAL- PERIAPICAL-FIRST FILM

D0230 INTRAORAL - PERIAPICAL - EACH ADDITIONAL FILM

D0240 INTRAORAL- OCCLUSAL FILM

D0250 EXTRAORAL--FIRST FILM

D0260 EXTRAORAL- EACH ADDITIONAL FILM

D0270 BITEWING- SINGLE FILM

D0272 BITEWINGS- TWO FILMS

M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIM=50-26 F/D RI

M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIM=50-26 F/D RI

M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIM=50-26 F/D RI

M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIM=50-26 F/D RI

M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIM=50-26 F/D RI

M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIM=50-26 F/D RI

M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIM=50-26 F/D RI

M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIM=50-26 F/D RI

M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIM=50-26 F/D RI

M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIM=50-26 F/D RI

M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIM=50-26 F/D RI

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HCFA COMMON PROCEDURE CODING SYSTEM

D0274 BITEWINGS- FOUR FILMS

 M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIN=50-26 F/D RI

D0275 BITEWINGS-EACH ADDITIONAL FILM

 M/D=1189 A/C=F COV=D DCA
 CIN=50-26 F/D RI

D0290 POSTEROANTERIOR AND LATERAL SKULL AND FACIAL BONE, SURVEY FILM

 M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIN=50-26 F/D RI

D0310 SALIOGRAPHY

 M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIN=50-26 F/D RI

D0320 TEMPOROMANDIBULAR JOINT ARTHROGRAM, INCLUDING INJECTION

 M/D=1189 A/C=F COV=D DCA
 CIN=50-26 F/D RI

D0321 OTHER TEMPOROMANDIBULAR JOINT FILMS, BY REPORT

 M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIN=50-26 F/D RI

D0330 PANORAMIC FILM

 M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIN=50-26 F/D RI

D0340 CEPHALOMETRIC FILM

 M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIN=50-26 F/D RI

TEST AND LABORATORY EXAMINATIONS

D0410 BACTERIOLOGIC STUDIES FOR DETERMINATION OF PATHOLOGIC AGENTS

 M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIN=50-26 F/D RI

D0420 CARIES SUSCEPTIBILITY TESTS

 M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIN=50-26 F/D RI

D0460 PULP VITALITY TESTS

 M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIN=50-26 F/D RI

D0470 DIAGNOSTIC CASTS

 M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIN=50-26 F/D RI

D0471 DIAGNOSTIC PHOTOGRAPHS

 M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIN=50-26 F/D RI

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HCFA COMMON PROCEDURE CODING SYSTEM

D0501 HISTOPATHOLOGIC EXAMINATIONS

D0502 OTHER ORAL PATHOLOGY PROCEDURES, BY REPORT

D0999 UNSPECIFIED DIAGNOSTIC PROCEDURE, BY REPORT

D1000-D1999 II. PREVENTIVE

DENTAL PROPHYLAXIS

D1110 PROPHYLAXIS - ADULT

D1120 PROPHYLAXIS - CHILD

TOPICAL FLUORIDE TREATMENT (OFFICE PROCEDURE)

D1201 TOPICAL APPLICATION OF FLUORIDE (INCLUDING PROPHYLAXIS) - CHILD

D1202 TOPICAL APPLICATION OF FLUORIDE (INCLUDING PROPHYLAXIS) - ADULT

D1203 TOPICAL APPLICATION OF FLUORIDE (EXCLUDING PROPHYLAXIS)-CHILD

D1204 TOPICAL APPLICATION OF FLUORIDE (EXCLUDING PROPHYLAXIS)-ADULT

OTHER PREVENTIVE SERVICES

D1310 DIETARY PLANNING FOR THE CONTROL OF DENTAL CARIES

D1330 ORAL HYGIENE INSTRUCTION

M/D=1189	A/C=F	COV=D	DCA
CIM=50-26		F/D	RI

M/D=1189	A/C=F	COV=D	DCA
CIM=50-26		F/D	RI

M/D=1189	A/C=F	COV=D	DCA
ILC			SP=D SA
CIM=50-26		F/D	RI

M/D=1189	A/C=F	COV=D	DCA
ILC			SP=D SA
CIM=50-26		F/D	RI
MCM 2336			

M/D=1189	A/C=F	COV=D	DCA
ILC			SP=D SA
CIM=50-26		F/D	RI
MCM 2336			

M/D=1189	A/C=F	COV=D	DCA
CIM=50-26		F/D	RI
MCM 2336			

M/D=1189	A/C=F	COV=D	DCA
CIM=50-26		F/D	RI
MCM 2336			

M/D=1189	A/C=F	COV=D	DCA
CIM=50-26		F/D	RI
MCM 2336			

M/D=1189	A/C=F	COV=D	DCA
CIM=50-26		F/D	RI
MCM 2336			

M/D=1189	A/C=F	COV=D	DCA
ILC			SP=D SA
CIM=50-26		F/D	RI
MCM 2336			

M/D=1189	A/C=F	COV=D	DCA
ILC			SP=D SA
CIM=50-26		F/D	RI
MCM 2336			

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HCFA COMMON PROCEDURE CODING SYSTEM

D1351 SEALANT - PER TOOTH

SPACE MAINTENANCE (PASSIVE APPLIANCES)

D1510 SPACE MAINTAINER - FIXED-UNILATERAL

D1515 SPACE MAINTAINER - FIXED-BILATERAL

D1520 SPACE MAINTAINER - REMOVABLE-UNILATERAL

D1525 SPACE MAINTAINER - REMOVABLE-BILATERAL

D1550 RECEMENTATION OF SPACE MAINTAINER

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M/D=1189 A/C=F COV=D DCA
CIN=50-26 F/D RI
NCM 2336

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M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIN=50-26 F/D RI
NCM 2336

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M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIN=50-26 F/D RI
NCM 2336

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M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIN=50-26 F/D RI
NCM 2336

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M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIN=50-26 F/D RI
NCM 2336

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M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIN=50-26 F/D RI
NCM 2336

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HCFA COMMON PROCEDURE CODING SYSTEM

D2000-D2999 III. RESTORATIVE

AMALGAM RESTORATIONS (INCLUDING POLISHING)

D2110 AMALGAM-ONE SURFACE, PRIMARY

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIM=50-26 F/D RI
 NCM 2336

D2120 AMALGAM-TWO SURFACES, PRIMARY

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIM=50-26 F/D RI
 NCM 2336

D2130 AMALGAM-THREE SURFACES, PRIMARY

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIM=50-26 F/D RI
 NCM 2336

D2131 AMALGAM-FOUR SURFACES, PRIMARY

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIM=50-26 F/D RI
 NCM 2336

D2140 AMALGAM- ONE SURFACE, PERMANENT

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIM=50-26 F/D RI
 NCM 2336

D2150 AMALGAM- TWO SURFACES, PERMANENT

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIM=50-26 F/D RI
 NCM 2336

D2160 AMALGAM- THREE SURFACES, PERMANENT

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIM=50-26 F/D RI
 NCM 2336

D2161 AMALGAM- FOUR OR MORE SURFACES, PERMANENT

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIM=50-26 F/D RI
 NCM 2336

SILICATE RESTORATIONS

D2210 SILICATE CEMENT - PER RESTORATION

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIM=50-26 F/D RI
 NCM 2336

FILLED OR UNFILLED RESIN RESTORATIONS

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HCFA COMMON PROCEDURE CODING SYSTEM

D2330 RESIN-ONE SURFACE

D2331 RESIN-TWO SURFACES

D2332 RESIN-THREE SURFACES

D2335 RESIN - FOUR OR MORE SURFACES OR INVOLVING INCISAL ANGLE

GOLD FOIL RESTORATIONS

D2410 GOLD FOIL - ONE SURFACE

D2420 GOLD FOIL - TWO SURFACES

D2430 GOLD FOIL - THREE SURFACES

INLAY RESTORATIONS

D2510 INLAY - METALLIC - ONE SURFACE

D2520 INLAY - METALLIC - TWO SURFACES

D2530 INLAY - METALLIC - THREE SURFACES

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*
*      M/D=1189 A/C=F COV=D DCA
*      ILC          SP=D SA
*      CIM=50-26    F/D    RI
*      MCM 2336
*
*      M/D=1189 A/C=F COV=D DCA
*      ILC          SP=D SA
*      CIM=50-26    F/D    RI
*      MCM 2336
*
*      M/D=1189 A/C=F COV=D DCA
*      ILC          SP=D SA
*      CIM=50-26    F/D    RI
*      MCM 2336
*
*      M/D=1189 A/C=F COV=D DCA
*      ILC          SP=D SA
*      CIM=50-26    F/D    RI
*      MCM 2336
*
*      M/D=1189 A/G=F COV=D DCA
*      ILC          SP=D SA
*      CIM=50-26    F/D    RI
*      MCM 2336
*
*      M/D=1189 A/C=F COV=D DCA
*      ILC          SP=D SA
*      CIM=50-26    F/D    RI
*      MCM 2336
*
*      M/D=1189 A/C=F COV=D DCA
*      ILC          SP=D SA
*      CIM=50-26    F/D    RI
*      MCM 2336
*
*      M/D=1189 A/C=F COV=D DCA
*      ILC          SP=D SA
*      CIM=50-26    F/D    RI
*      MCM 2336
*
*      M/D=1189 A/C=F COV=D DCA
*      ILC          SP=D SA
*      CIM=50-26    F/D    RI
*      MCM 2336
*

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HCFA COMMON PROCEDURE CODING SYSTEM

D2540 ONLAY - METALLIC - PER TOOTH (IN ADDITION TO INLAY)

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIM=50-26 F/D RI
 MCM 2336

D2610 INLAY - PORCELAIN/CERAMIC - ONE SURFACE

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIM=50-26 F/D RI
 MCM 2336

D2620 INLAY - PORCELAIN/CERAMIC-TWO SURFACES

M/D=1189 A/C=F COV=D DCA
 CIM=50-26 F/D RI
 MCM 2336

D2630 INLAY - PORCELAIN/CERAMIC-THREE SURFACES

M/D=1189 A/C=F COV=D DCA
 CIM=50-26 F/D RI
 MCM 2336

CROWNS - SINGLE RESTORATION ONLY

D2710 CROWN-RESIN (LABORATORY)

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIM=50-26 F/D RI
 MCM 2336

D2720 CROWN-RESIN WITH HIGH NOBLE METAL

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIM=50-26 F/D RI
 MCM 2336

D2721 CROWN-RESIN WITH PREDOMINANTLY BASE METAL

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIM=50-26 F/D RI
 MCM 2336

D2722 CROWN-RESIN WITH NOBLE METAL

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIM=50-26 F/D RI
 MCM 2336

D2740 CROWN-PORCELAIN/CERAMIC SUBSTRATE

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIM=50-26 F/D RI
 MCM 2336

D2750 CROWN-PORCELAIN FUSED TO HIGH NOBLE METAL

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIM=50-26 F/D RI
 MCM 2336

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HCFA COMMON PROCEDURE CODING SYSTEM

D2751 CROWN-PROCELAIN FUSED TO PREDOMINANTLY /BASE METAL

D2752 CROWN-PORCELAIN FUSED TO NOBLE METAL

D2790 CROWN - FULL CAST HIGH NOBLE METAL

D2791 CROWN - FULL CAST PREDOMINANTLY BASE METAL

D2792 CROWN - FULL CAST NOBLE METAL

D2810 CROWN - 3/4 CAST METALLIC

OTHER RESTORATIVE SERVICES

D2910 RECEMENT INLAY

D2920 RECEMENT CROWN

D2930 PREFABRICATED STAINLESS STEEL CROWN - PRIMARY TOOTH

D2931 PREFABRICATED STAINLESS STEEL CROWN - PERMANENT TOOTH

*	M/D=1189	A/C=F	COV=D	DCA
*	ILC			SP=D SA
*	CIM=50-26		F/D	RI
*	MCM 2336			
*				
*	M/D=1189	A/C=F	COV=D	DCA
*	ILC			SP=D SA
*	CIM=50-26		F/D	RI
*	MCM 2336			
*				
*	M/D=1189	A/C=F	COV=D	DCA
*	ILC			SP=D SA
*	CIM=50-26		F/D	RI
*	MCM 2336			
*				
*	M/D=1189	A/C=F	COV=D	DCA
*	ILC			SP=D SA
*	CIM=50-26		F/D	RI
*	MCM 2336			
*				
*	M/D=1189	A/C=F	COV=D	DCA
*	ILC			SP=D SA
*	CIM=50-26		F/D	RI
*	MCM 2336			
*				
*	M/D=1189	A/C=F	COV=D	DCA
*	ILC			SP=D SA
*	CIM=50-26		F/D	RI
*	MCM 2336			
*				
*	M/D=1189	A/C=F	COV=D	DCA
*	ILC			SP=D SA
*	CIM=50-26		F/D	RI
*	MCM 2336			
*				
*	M/D=1189	A/C=F	COV=D	DCA
*	ILC			SP=D SA
*	CIM=50-26		F/D	RI
*	MCM 2336			
*				

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HCFA COMMON PROCEDURE CODING SYSTEM

D2932 PREFABRICATED RESIN CROWN

 M/D=1189 A/C=F COV=D DCA
 C1M=50-26 F/D RI
 NCM 2336

D2940 SEDATIVE FILLING

 M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 C1M=50-26 F/D RI
 NCM 2336

D2950 CROWN BUILD-UP, INCLUDING ANY PINS

 M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 C1M=50-26 F/D RI
 NCM 2336

D2951 PIN RETENTION - PER TOOTH, IN ADDITION TO RESTORATION

 M/D=1189 A/C=F COV=D DCA
 C1M=50-26 F/D RI
 NCM 2336

D2952 CAST POST AND CORE IN ADDITION TO CROWN

 M/D=1189 A/C=F COV=D DCA
 C1M=50-26 F/D RI
 NCM 2336

D2953 CAST POST AS PART OF CROWN

 M/D=1189 A/C=F COV=D DCA
 C1M=50-26 F/D RI
 NCM 2336

D2954 PREFABRICATED POST AND CORE IN ADDITION TO CROWN

 M/D=1189 A/C=F COV=D DCA
 C1M=50-26 F/D RI
 NCM 2336

D2960 LABIAL VENEER (LAMINATE)

 M/D=1189 A/C=F COV=D DCA
 C1M=50-26 F/D RI
 NCM 2336

D2970 TEMPORARY (FRACTURED TOOTH)

 M/D=1189 A/C=F COV=D DCA
 C1M=50-26 F/D RI
 NCM 2336

D2980 CROWN REPAIR, BY REPORT

 M/D=1189 A/C=F COV=D DCA
 C1M=50-26 F/D RI
 NCM 2336

D2999 UNSPECIFIED RESTORATIVE PROCEDURE, BY REPORT

 M/D=1189 A/C=F COV=D DCA
 C1M=50-26 F/D RI
 NCM 2336

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HCFA COMMON PROCEDURE CODING SYSTEM

D3000-D3999 IV. ENDODONTICS

PULP CAPPING

D3110 PULP CAP - DIRECT (EXCLUDING FINAL RESTORATION)

D3120 PULP CAP -INDIRECT (EXCLUDING FINAL RESTORATION)

PULPOTOMY

D3220 THERAPEUTIC PULPOTOMY (EXCLUDING FINAL RESTORATION)

ROOT CANAL THERAPY (INCLUDING TREATMENT PLAN,
CLINICAL PROCEDURES, AND FOLLOW-UP CARE)

D3310 ONE CANAL (EXCLUDING FINAL RESTORATION)

D3320 TWO CANALS (EXCLUDING FINAL RESTORATION)

D3330 THREE CANALS (EXCLUDING FINAL RESTORATION)

D3340 FOUR OR MORE CANALS (EXCLUDING FINAL RESTORATION)

D3350 APEXIFICATION (PER TREATMENT VISIT)

PERIAPICAL SERVICES

D3410 APICOECTOMY (PER TOOTH) - FIRST ROOT

M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIM=50-26 F/D RI
NCM 2336

M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIM=50-26 F/D RI
NCM 2336

M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIM=50-26 F/D RI
NCM 2336

M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIM=50-26 F/D RI
NCM 2336

M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIM=50-26 F/D RI
NCM 2336

M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIM=50-26 F/D RI
NCM 2336

M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIM=50-26 F/D RI
NCM 2336

M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIM=50-26 F/D RI
NCM 2336

M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIM=50-26 F/D RI
NCM 2336

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HCFA COMMON PROCEDURE CODING SYSTEM

D3411 APICOECTOMY (PER TOOTH) - EACH ADDITIONAL ROOT

 * M/D=1189 A/C=F COV=D DCA
 * CIM=50-26 F/D RI
 * MCM 2336
 *

D3430 RETROGRADE FILLING - PER ROOT

 * M/D=1189 A/C=F COV=D DCA
 * ILC SP=D SA
 * CIM=50-26 F/D RI
 * MCM 2336
 *

D3440 APICAL CURETTAGE

 * M/D=1189 A/C=F COV=D DCA
 * ILC SP=D SA
 * CIM=50-26 F/D RI
 * MCM 2336
 *

D3450 ROOT AMPUTATION - PER ROOT

 * M/D=1189 A/C=F COV=D DCA
 * ILC SP=D SA
 * CIM=50-26 F/D RI
 * MCM 2336
 *

D3460 ENDODONTIC ENDOSSEOUS IMPLANT

 * M/D=1189 A/C=F COV=D DCA
 * ILC SP=D SA
 * CIM=50-26 F/D RI
 * MCM 2336
 *

OTHER ENDODONTIC PROCEDURES

D3910 SURGICAL PROCEDURE FOR ISOLATION OF TOOTH WITH RUBBER DAM

 * M/D=1189 A/C=F COV=D DCA
 * ILC SP=D SA
 * CIM=50-26 F/D RI
 * MCM 2336
 *

D3920 HEMISECTION (INCLUDING ANY ROOT REMOVAL), NOT INCLUDING ROOT CANAL THERAPY

 * M/D=1189 A/C=F COV=D DCA
 * ILC SP=D SA
 * CIM=50-26 F/D RI
 * MCM 2336
 *

D3940 RECALCIFICATION OR REPAIR (PERFORATIONS, ROOT RESORPTION, ETC.)

 * M/D=1189 A/C=F COV=D DCA
 * ILC SP=D SA
 * CIM=50-26 F/D RI
 * MCM 2336
 *

D3950 CANAL PREPARATION AND FITTING OF PREFORMED DOWEL OR POST

 * M/D=1189 A/C=F COV=D DCA
 * ILC SP=D SA
 * CIM=50-26 F/D RI
 * MCM 2336
 *

D3960 BLEACHING OF DISCOLORED TOOTH

 * M/D=1189 A/C=F COV=D DCA
 * ILC SP=D SA
 * CIM=50-26 F/D RI
 * MCM 2336
 *

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HCFA COMMON PROCEDURE CODING SYSTEM

D3999 UNSPECIFIED ENDOODONTIC PROCEDURE, BY REPORT

D4000-D4999 V. PERIODONTICS

SURGICAL SERVICES (INCLUDING USUAL POSTOPERATIVE SERVICES)

D4210 GINGIVECTOMY OR GINGIVOPLASTY - PER QUADRANT

D4211 GINGIVECTOMY OR GINGIVOPLASTY - PER TOOTH

D4220 GINGIVAL CURETTAGE, BY REPORT

D4240 GINGIVAL FLAP PROCEDURE, INCLUDING ROOT PLANING - PER QUADRANT

D4260 OSSEOUS SURGERY (INCLUDING FLAP ENTRY AND CLOSURE)-PER QUADRANT

D4261 OSSEOUS GRAFT - SINGLE SITE (INCLUDING FLAP ENTRY, CLOSURE,
AND DONOR SITE)D4262 OSSEOUS GRAFT - MULTIPLE SITES (INCLUDING FLAP ENTRY, CLOSURE,
AND DONOR SITES)

D4270 PEDICLE SOFT TISSUE GRAFT PROCEDURE

M/D=1189	A/C=F	COV=D	DCA
ILC			SP=D SA
CIM=50-26		F/D	RI
MCM 2336			

M/D=1189	A/C=F	COV=D	DCA
ILC			SP=D SA
CIM=50-26		F/D	RI
MCM 2336			

M/D=1189	A/C=F	COV=D	DCA
CIM=50-26		F/D	RI
MCM 2336			

M/D=1189	A/C=F	COV=D	DCA
ILC			SP=D SA
CIM=50-26		F/D	RI
MCM 2336			

M/D=1189	A/C=F	COV=D	DCA
ILC			SP=D SA
CIM=50-26		F/D	RI
MCM 2336			

M/D=1189	A/C=F	COV=D	DCA
ILC			SP=D SA
CIM=50-26		F/D	RI
MCM 2336			

M/D=1189	A/C=F	COV=D	DCA
ILC			SP=D SA
CIM=50-26		F/D	RI
MCM 2336			

M/D=1189	A/C=F	COV=D	DCA
ILC			SP=D SA
CIM=50-26		F/D	RI
MCM 2336			

M/D=1189	A/C=F	COV=D	DCA
ILC			SP=D SA
CIM=50-26		F/D	RI
MCM 2336			

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HCFA COMMON PROCEDURE CODING SYSTEM

D4271 FREE SOFT TISSUE GRAFT PROCEDURE (INCLUDING DONOR SITE)

```

M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIM=50-26 F/D RI
NCM 2336

```

D4272 APICALLY REPOSITIONING FLAP PROCEDURE

```

M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIM=50-26 F/D RI
NCM 2336

```

ADJUNCTIVE PERIODONTAL SERVICES

D4320 PROVISIONAL SPLINTING - INTRACORONAL

```

M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIM=50-26 F/D RI
NCM 2336

```

D4321 PROVISIONAL SPLINTING - EXTRACORONAL

```

M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIM=50-26 F/D RI
NCM 2336

```

D4340 PERIODONTAL SCALING AND ROOT PLANING - ENTIRE MOUTH

```

M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIM=50-26 F/D RI
NCM 2336

```

D4341 PERIODONTAL SCALING AND ROOT PLANING-PER QUADRANT

```

M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIM=50-26 F/D RI
NCM 2336

```

OTHER PERIODONTIC SERVICES

D4910 PERIODONTAL MAINTENANCE PROCEDURES FOLLOWING ACTIVE THERAPY (PERIODONTAL PROPHYLAXIS)

```

M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIM=50-26 F/D RI
NCM 2336

```

D4920 UNSCHEDULED DRESSING CHANGE (BY SOMEONE OTHER THAN TREATING DENTIST)

```

M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIM=50-26 F/D RI
NCM 2336

```

D4999 UNSPECIFIED PERIODONTAL PROCEDURE, BY REPORT

```

M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIM=50-26 F/D RI
NCM 2336

```

D5000-D5999 VI. PROSTHODONTICS (REMOVABLE)

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HCFA COMMON PROCEDURE CODING SYSTEM

COMPLETE DENTURES (INCLUDING ROUTINE POSTDELIVERY CARE)

D5110 COMPLETE UPPER

D5120 COMPLETE LOWER

D5130 IMMEDIATE UPPER

D5140 IMMEDIATE LOWER

PARTIAL DENTURES (INCLUDING ROUTINE
POSTDELIVERY CARE)D5211 UPPER PARTIAL - ACRYLIC BASE (INCLUDING ANY
CONVENTIONAL CLASPS AND RESTS)D5212 LOWER PARTIAL - ACRYLIC BASE (INCLUDING ANY
CONVENTIONAL CLASPS AND RESTS)D5213 UPPER PARTIAL - PREDOMINANTLY BASE CAST BASE WITH ACRYLIC SADDLES
(INCLUDING ANY CONVENTIONAL CLASPS AND RESTS)D5214 LOWER PARTIAL - PREDOMINANTLY BASE CAST BASE WITH ACRYLIC SADDLES
(INCLUDING ANY CONVENTIONAL CLASPS AND RESTS)D5215 UPPER PARTIAL - HIGH NOBLE CAST BASE WITH ACRYLIC SADDLES
(INCLUDING ANY CONVENTIONAL CLASPS AND RESTS)D5216 LOWER PARTIAL - HIGH NOBLE CAST BASE WITH ACRYLIC SADDLES
(INCLUDING ANY CONVENTIONAL CLASPS AND RESTS)

M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIM=50-26 F/D RI
NCM 2336

M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIM=50-26 F/D RI
NCM 2336

M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIM=50-26 F/D RI
NCM 2336

M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIM=50-26 F/D RI
NCM 2336

M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIM=50-26 F/D RI
NCM 2336

M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIM=50-26 F/D RI
NCM 2336

M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIM=50-26 F/D RI
NCM 2336

M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIM=50-26 F/D RI
NCM 2336

M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIM=50-26 F/D RI
NCM 2336

M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIM=50-26 F/D RI
NCM 2336

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HCFA COMMON PROCEDURE CODING SYSTEM

D5280 REMOVABLE UNILATERAL PARTIAL DENTURE - ONE PIECE HIGH NOBLE CASTING,
CLASP ATTACHMENTS - PER UNIT (INCLUDING PONTICS)

D5281 REMOVABLE UNILATERAL PARTIAL DENTURE - ONE PIECE PREDOMINANTLY
BASE CASTINGS, CLASP ATTACHMENTS - PER UNIT (INCLUDING PONTICS)

ADJUSTMENTS TO DENTURES

D5410 ADJUST COMPLETE DENTURE-UPPER

D5411 ADJUST COMPLETE DENTURE - LOWER

D5421 ADJUST PARTIAL DENTURE - UPPER

D5422 ADJUST PARTIAL DENTURE - LOWER

REPAIRS TO COMPLETE DENTURES

D5510 REPAIR BROKEN COMPLETE DENTURE BASE

D5520 REPLACE MISSING OR BROKEN TEETH - COMPLETE DENTURE (EACH TOOTH)

REPAIRS TO PARTIAL DENTURES

D5610 REPAIR ACRYLIC SADDLE OR BASE

D5620 REPAIR CAST FRAMEWORK

M/D=1189	A/C=F	COV=D	DCA
ILC			SP=D SA
CIM=50-26	F/D		RI
MCM 2336			
M/D=1189	A/C=F	COV=D	DCA
ILC			SP=D SA
CIM=50-26	F/D		RI
MCM 2336			
M/D=1189	A/C=F	COV=D	DCA
ILC			SP=D SA
CIM=50-26	F/D		RI
MCM 2336			
M/D=1189	A/C=F	COV=D	DCA
ILC			SP=D SA
CIM=50-26	F/D		RI
MCM 2336			
M/D=1189	A/C=F	COV=D	DCA
ILC			SP=D SA
CIM=50-26	F/D		RI
MCM 2336			
M/D=1189	A/C=F	COV=D	DCA
ILC			SP=D SA
CIM=50-26	F/D		RI
MCM 2336			
M/D=1189	A/C=F	COV=D	DCA
ILC			SP=D SA
CIM=50-26	F/D		RI
MCM 2336			

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NCFA COMMON PROCEDURE CODING SYSTEM

D5630 REPAIR OR REPLACE BROKEN CLASP

D5640 REPLACE BROKEN TEETH - PER TOOTH

D5650 ADD TOOTH TO EXISTING PARTIAL DENTURE

D5660 ADD CLASP TO EXISTING PARTIAL DENTURE
TOOTH, INVOLVING CLASP OR ABUTMENT TOOTH

DENTURE REBASE PROCEDURES

D5710 REBASE COMPLETE UPPER DENTURE

D5711 REBASE COMPLETE LOWER DENTURE

D5720 REBASE UPPER PARTIAL DENTURE

D5721 REBASE LOWER PARTIAL DENTURE

DENTURE RELINE PROCEDURES

D5730 RELINE UPPER COMPLETE DENTURE (CHAIRSIDE)

D5731 RELINE LOWER COMPLETE DENTURE (CHAIRSIDE)

*	M/D=1189	A/C=F	COV=D	DCA
*	ILC			SP=D SA
*	CIM=50-26		F/D	RI
*	MCM 2336			
*	M/D=1189	A/C=F	COV=D	DCA
*	ILC			SP=D SA
*	CIM=50-26		F/D	RI
*	MCM 2336			
*	M/D=1189	A/C=F	COV=D	DCA
*	ILC			SP=D SA
*	CIM=50-26		F/D	RI
*	MCM 2336			
*	M/D=1189	A/C=F	COV=D	DCA
*	ILC			SP=D SA
*	CIM=50-26		F/D	RI
*	MCM 2336			
*	M/D=1189	A/C=F	COV=D	DCA
*	ILC			SP=D SA
*	CIM=50-26		F/D	RI
*	MCM 2336			
*	M/D=1189	A/C=F	COV=D	DCA
*	ILC			SP=D SA
*	CIM=50-26		F/D	RI
*	MCM 2336			
*	M/D=1189	A/C=F	COV=D	DCA
*	CIM=50-26		F/D	RI
*	MCM 2336			
*	M/D=1189	A/C=F	COV=D	DCA
*	ILC			SP=D SA
*	CIM=50-26		F/D	RI
*	MCM 2336			
*	M/D=1189	A/C=F	COV=D	DCA
*	ILC			SP=D SA
*	CIM=50-26		F/D	RI
*	MCM 2336			
*	M/D=1189	A/C=F	COV=D	DCA
*	CIM=50-26		F/D	RI
*	MCM 2336			

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HCFA COMMON PROCEDURE CODING SYSTEM

D5740 RELINE UPPER PARTIAL DENTURE (CHAIRSIDE)

```

M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIM=50-26 F/D RI
NCM 2336

```

D5741 RELINE LOWER PARTIAL DENTURE (CHAIRSIDE)

```

M/D=1189 A/C=F COV=D DCA
CIM=50-26 F/D RI
NCM 2336

```

D5750 RELINE UPPER COMPLETE DENTURE (LABORATORY)

```

M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIM=50-26 F/D RI
NCM 2336

```

D5751 RELINE LOWER COMPLETE DENTURE (LABORATORY)

```

M/D=1189 A/C=F COV=D DCA
CIM=50-26 F/D RI
NCM 2336

```

D5760 RELINE UPPER PARTIAL DENTURE (LABORATORY)

```

M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIM=50-26 F/D RI
NCM 2336

```

D5761 RELINE LOWER PARTIAL DENTURE (LABORATORY)

```

M/D=1189 A/C=F COV=D DCA
CIM=50-26 F/D RI
NCM 2336

```

OTHER REMOVABLE PROSTHETIC SERVICES

D5810 TEMPORARY COMPLETE DENTURE (UPPER)

```

M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIM=50-26 F/D RI
NCM 2336

```

D5811 TEMPORARY COMPLETE DENTURE (LOWER)

```

M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIM=50-26 F/D RI
NCM 2336

```

D5820 TEMPORARY PARTIAL - STAYPLATE DENTURE (UPPER)

```

M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIM=50-26 F/D RI
NCM 2336

```

D5821 TEMPORARY PARTIAL - STAYPLATE DENTURE (LOWER)

```

M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIM=50-26 F/D RI
NCM 2336

```

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HCFA COMMON PROCEDURE CODING SYSTEM

D5050 TISSUE CONDITIONING - PER DENTURE UNIT

```

M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIM=50-26 F/D RI
MCN 2336

```

D5060 OVERDENTURE - COMPLETE, BY REPORT

```

M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIM=50-26 F/D RI
MCN 2336

```

D5061 OVERDENTURE - PARTIAL, BY REPORT

```

M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIM=50-26 F/D RI
MCN 2336

```

D5062 PRECISION ATTACHMENT, BY REPORT

```

M/D=1189 A/C=F COV=D DCA
CIM=50-26 F/D RI
MCN 2336

```

D5099 UNSPECIFIED REMOVABLE PROSTHODONTIC PROCEDURE, BY REPORT

```

M/D=1189 A/C=F COV=D DCA
CIM=50-26 F/D RI
MCN 2336

```

D5900-D5999 VII. MAXILLOFACIAL PROSTHETICS

EXTRAORAL PROSTHESES (INCLUDING THREE MONTHS' MAINTENANCE)

D5911 FACIAL MOULAGE (SECTIONAL)

```

M/D=1189 A/C=F COV=D DCA
CIM=50-26 F/D RI
MCN 2130 A

```

D5912 FACIAL MOULAGE (COMPLETE)

```

M/D=1189 A/C=F COV=D DCA
CIM=50-26 F/D RI
MCN 2130 A

```

D5913 NASAL PROSTHESIS

```

M/D=1189 A/C=F COV=D DCA
CIM=50-26 F/D RI
MCN 2130 A

```

D5914 AURICULAR PROSTHESIS

```

M/D=1189 A/C=F COV=D DCA
CIM=50-26 F/D RI
MCN 2130 A

```

D5915 ORBITAL PROSTHESIS

```

M/D=1189 A/C=F COV=D DCA
CIM=50-26 F/D RI
MCN 2130 A

```

D5916 OCULAR PROSTHESIS

```

M/D=1189 A/C=F COV=D DCA
CIM=50-26 F/D RI
MCN 2130 A

```

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HCFA COMMON PROCEDURE CODING SYSTEM

D5917 COMPOSITE FACIAL PROSTHESIS

D5918 REPLACEMENT PROSTHESIS

D5919 PROSTHETIC DRESSING

D5920 OCULAR IMPLANT

D5921 ORBITAL IMPLANT

INTRAORAL PROSTHESES - ACQUIRED DEFECTS

D5931 SURGICAL OBTURATOR

D5932 POSTSURGICAL OBTURATOR

D5933 REFITTING OF OBTURATOR

D5934 MANDIBULAR RESECTION (FLANGE) PROSTHESIS

D5935 MANDIBULAR RESECTION (DENTURE) PROSTHESIS

INTRORAL PROSTHESES - CONGENITAL DEFECTS

D5951 FEEDING AID

D5952 PEDIATRIC SPEECH AID

M/D=1189 A/C=F COV=D DCA
 CIM=50-26 F/D RI
 MCM 2130 A

M/D=1189 A/C=F COV=D DCA
 CIM=50-26 F/D RI
 MCM 2130 A

M/D=1189 A/C=F COV=D DCA
 CIM=50-26 F/D RI
 MCM 2130 A

M/D=1189 A/C=F COV=D DCA
 CIM=50-26 F/D RI
 MCM 2130 A

M/D=1189 A/C=F COV=D DCA
 CIM=50-26 F/D RI
 MCM 2130 A

M/D=1189 A/C=F COV=D DCA
 CIM=50-26 F/D RI
 MCM 2130 A

M/D=1189 A/C=F COV=D DCA
 CIM=50-26 F/D RI
 MCM 2130 A

M/D=1189 A/C=F COV=D DCA
 CIM=50-26 F/D RI
 MCM 2130 A

M/D=1189 A/C=F COV=D DCA
 CIM=50-26 F/D RI
 MCM 2130 A

M/D=1189 A/C=F COV=D DCA
 CIM=50-26 F/D RI
 MCM 2130 A

M/D=1189 A/C=F COV=D DCA
 CIM=50-26 F/D RI
 MCM 2336

M/D=1189 A/C=C COV=D DCA
 CIM=50-26 F/D RI
 MCM 2336

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HCFA COMMON PROCEDURE CODING SYSTEM

D5953 ADULT SPEECH AID

D5954 SUPERIMPOSED PROSTHESIS

D5955 PALATAL LIFT PROSTHESIS

D5956 OBTURATOR

D5957 SPEECH BULB

IMPLANTS - FACIAL, MANDIBULAR, CRANIAL

D5971 SIMPLE IMPLANT

D5972 COMPLEX IMPLANT

D5973 SUBPERIOSTEAL IMPLANT

D5974 ENDOSSEOUS IMPLANT (IN THE BONE)

D5976 MANDIBULAR STAPLE IMPLANT

TREATMENT PROSTHESES

D5982 SURGICAL STENT

D5983 RADIATION CARRIER

M/D=1189 A/C=F COV=D DCA
 CIN=50-26 F/D RI
 MCM 2336

M/D=1189 A/C=F COV=D DCA
 CIN=50-26 F/D RI
 MCM 2336

M/D=1189 A/C=F COV=D DCA
 CIN=50-26 F/D RI
 MCM 2336

M/D=1189 A/C=F COV=D DCA
 CIN=50-26 F/D RI
 MCM 2336

M/D=1189 A/C=F COV=D DCA
 CIN=50-26 F/D RI
 MCM 2336

M/D=1189 A/C=F COV=D DCA
 CIN=50-26 F/D RI
 MCM 2336

M/D=1189 A/C=F COV=D DCA
 CIN=50-26 F/D RI
 MCM 2336

M/D=1189 A/C=F COV=D DCA
 CIN=50-26 F/D RI
 MCM 2336

M/D=1189 A/C=F COV=D DCA
 CIN=50-26 F/D RI
 MCM 2336

M/D=1189 A/C=F COV=D DCA
 CIN=50-26 F/D RI
 MCM 2336

M/D=1189 A/C=F COV=D DCA
 CIN=50-26 F/D RI
 MCM 2336

M/D=1189 A/C=F COV=D DCA
 CIN=50-26 F/D RI
 MCM 2336

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HCFA COMMON PROCEDURE CODING SYSTEM

D5984 RADIATION SHIELD

M/D=1189 A/C=F COV=D DCA
 CIM=50-26 F/D RI
 MCM 2336

D5985 DOCKING DEVICE-CONE LOCATOR

M/D=1189 A/C=F COV=D DCA
 CIM=50-26 F/D RI
 MCM 2336

D5986 FLUORIDE APPLICATOR-PER ARCH

M/D=1189 A/C=F COV=D DCA
 CIM=50-26 F/D RI
 MCM 2336

D5999 UNSPECIFIED MAXILLOFACIAL PROSTHESIS, BY REPORT

M/D=1189 A/C=F COV=D DCA
 CIM=50-26 F/D RI
 MCM 2336 2130A

D6000-D6999 VIII. PROSTHODONTICS, FIXED

(EACH ABUTMENT AND EACH PONTIC CONSTITUTES A UNIT IN A BRIDGE.)

BRIDGE PONTICS

D6210 PONTIC - CAST HIGH NOBLE METAL

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIM=50-26 F/D RI
 MCM 2336

D6211 PONTIC - CAST PREDOMINANTLY BASE METAL

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIM=50-26 F/D RI
 MCM 2336

D6212 PONTIC - CAST NOBLE METAL

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIM=50-26 F/D RI
 MCM 2336

D6240 PONTIC - PORCELAIN FUSED TO HIGH NOBLE METAL

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIM=50-26 F/D RI
 MCM 2336

D6241 PONTIC - PORCELAIN FUSED TO PREDOMINANTLY BASE METAL

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIM=50-26 F/D RI
 MCM 2336

D6242 PONTIC - PORCELAIN FUSED TO NOBLE METAL

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIM=50-26 F/D RI
 MCM 2336

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HCFA COMMON PROCEDURE CODING SYSTEM

* M/D=1189 A/C=F COV=D DCA
* ILC SP=D SA
* CIM=50-26 F/D RI
* MCM 2336

* M/D=1189 A/C=F COV=D DCA
* ILC SP=D SA
* CIM=50-26 F/D RI
* NCM 2336

```

*      M/D=1189 A/C=F COV=D   DCA
*      ILC                               SP=D SA
*      CIM=50-26                      F/D   RI
*      MCM 2336

```

* M/D=1189 A/C=F COV=D DCA
* ILC SP=D SA
* CIM=50-26 F/D RI
* MCM 2336

* M/D=1189 A/C=F COV=D DCA
* ILC SP=D SA
* CIM=50-26 F/D RI
* MCM 2336

* M/D=1189 A/C=F COV=D DCA
* ILC SP=D SA
* CIM=50-26 F/D RI
* MCM 2336

```
*      M/D=1189  A/C=F  COV=D  DCA
*      CIN=50-26      F/D      RI
*      MCM 2336
```

* M/D=1189 A/C=F COV=D DCA
* ILC SP=D SA
* CIM=50-26 F/D RI
* MCM 2336

* M/D=1189 A/C=F COV=D DCA
* ILC SP=D SA
* CIM=50-26 F/D RI
* MCM 2336

* M/D=1189 A/C=F COV=D DCA
* ILC SP=D SA
* CIM=50-26 F/D RI
* MCM 2336

D6722 CROWN - RESIN WITH NOBLE METAL

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HCFA COMMON PROCEDURE CODING SYSTEM

D6750 CROWN - PORCELAIN FUSED TO HIGH NOBLE METAL

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIM=50-26 F/D RI
 MCM 2336

D6751 CROWN - PORCELAIN FUSED TO PREDOMINANTLY BASE METAL

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIM=50-26 F/D RI
 MCM 2336

D6752 CROWN - PORCELAIN FUSED TO NOBLE METAL

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIM=50-26 F/D RI
 MCM 2336

D6780 CROWN - 3/4 CAST HIGH NOBLE METAL

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIM=50-26 F/D RI
 MCM 2336

D6790 CROWN - FULL CAST HIGH NOBLE METAL

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIM=50-26 F/D RI
 MCM 2336

D6791 CROWN - FULL CAST PREDOMINANTLY BASE METAL

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIM=50-26 F/D RI
 MCM 2336

D6792 CROWN - FULL CAST NOBLE METAL

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIM=50-26 F/D RI
 MCM 2336

OTHER FIXED PROSTHETIC SERVICES

D6930 RECEMENT BRIDGE

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIM=50-26 F/D RI
 MCM 2336

D6940 STRESS BREAKER

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIM=50-26 F/D RI
 MCM 2336

D6950 PRECISION ATTACHMENT

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIM=50-26 F/D RI
 MCM 2336

D6970 CAST POST AND CORE IN ADDITION TO BRIDGE RETAINER

M/D=1189 A/C=F COV=D DCA
 CIM=50-26 F/D RI
 MCM 2336

D6971 CAST POST AS PART OF BRIDGE RETAINER

M/D=1189 A/C=F COV=D DCA
 CIM=50-26 F/D RI
 MCM 2336

D6972 PREFABRICATED POST AND CORE IN ADDITION TO BRIDGE RETAINER

M/D=1189 A/C=F COV=D DCA
 CIM=50-26 F/D RI
 MCM 2336

D6980 BRIDGE REPAIR, BY REPORT

M/D=1189 A/C=F COV=D DCA
 CIM=50-26 F/D RI
 MCM 2336

D6999 UNSPECIFIED FIXED PROSTHODONTIC PROCEDURE, BY REPORT

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIM=50-26 F/D RI
 MCM 2336

D7000 - D7999 IX. ORAL SURGERY

EXTRACTIONS - INCLUDES LOCAL ANESTHESIA AND
 ROUTINE POSTOPERATIVE CARE

D7110 SINGLE TOOTH

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIM=50-26 F/D RI
 MCM 2336

D7120 EACH ADDITIONAL TOOTH

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIM=50-26 F/D RI
 MCM 2336

D7130 ROOT REMOVAL - EXPOSED ROOTS

M/D=1189 A/C=F COV=D DCA
 CIM=50-26 F/D RI
 MCM 2336

SURGICAL EXTRACTIONS - INCLUDES LOCAL ANESTHESIA
 AND ROUTINE POSTOPERATIVE CARE

D7210 SURGICAL REMOVAL OF ERUPTED TOOTH REQUIRING ELEVATION
 OF MUCOPERIOSTEAL FLAP AND REMOVAL OF BONE AND/OR
 SECTION OF TOOTH

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIM=50-26 F/D RI
 MCM 2336

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HCFA COMMON PROCEDURE CODING SYSTEM

D7220 REMOVAL OF IMPACTED TOOTH - SOFT TISSUE

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIM=50-26 F/D RI
 MCM 2336

D7230 REMOVAL OF IMPACTED TOOTH - PARTIALLY BONY

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIM=50-26 F/D RI
 MCM 2336

D7240 REMOVAL OF IMPACTED TOOTH - COMPLETELY BONY

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIM=50-26 F/D RI
 MCM 2336

D7241 REMOVAL OF IMPACTED TOOTH - COMPLETELY BONY,
WITH UNUSUAL SURGICAL COMPLICATIONS

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIM=50-26 F/D RI
 MCM 2336

D7250 SURGICAL REMOVAL OF RESIDUAL TOOTH ROOTS (CUTTING PROCEDURE)

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIM=50-26 F/D RI
 MCM 2336

OTHER SURGICAL PROCEDURES

D7260 ORONTRAL FISTULA CLOSURE

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIM=50-26 F/D RI
 MCM 2336

D7270 TOOTH RE-IMPLANTATION AND/OR STABILIZATION OF ACCIDENTALLY EVULSED
OR DISPLACED TOOTH AND/OR ALVEOLUS

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIM=50-26 F/D RI
 MCM 2336

D7271 TOOTH IMPLANTATION

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIM=50-26 F/D RI
 MCM 2336

D7272 TOOTH TRANSPLANTATION

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIM=50-26 F/D RI
 MCM 2336

D7280 SURGICAL EXPOSURE OF IMPACTED OR UNERUPTED TOOTH FOR ORTHO-
DONTIC REASONS (INCLUDING ORTHODONTIC ATTACHMENTS)

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIM=50-26 F/D RI
 MCM 2336

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HCFA COMMON PROCEDURE CODING SYSTEM

D7281 SURGICAL EXPOSURE OF IMPACTED OR UNERUPTED TOOTH TO AID ERUPTION

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIM=50-26 F/D RI
 MCM 2336

D7285 BIOPSY OF ORAL TISSUE - HARD

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIM=50-26 F/D RI
 MCM 2336

D7286 BIOPSY OF ORAL TISSUE - SOFT

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIM=50-26 F/D RI
 MCM 2336

D7290 SURGICAL REPOSITIONING OF TEETH

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIM=50-26 F/D RI
 MCM 2336

D7291 TRANSSEPTAL FIBEROTOMY

M/D=1189 A/C=F COV=D DCA
 CIM=50-26 F/D RI
 MCM 2336

ALVEOLOPLASTY - SURGICAL PREPARATION OF RIDGE FOR DENTURES

D7310 ALVEOLOPLASTY IN CONJUNCTION WITH EXTRACTIONS - PER QUADRANT

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIM=50-26 F/D RI
 MCM 2336

D7320 ALVEOLOPLASTY NOT IN CONJUNCTION WITH EXTRACTIONS - PER QUADRANT

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIM=50-26 F/D RI
 MCM 2336

VESTIBULOPLASTY

D7340 VESTIBULOPLASTY - RIDGE EXTENSION (SECOND EPITHELIALIZATION)

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIM=50-26 F/D RI
 MCM 2336

D7350 VESTIBULOPLASTY - RIDGE EXTENSION (INCLUDING SOFT TISSUE GRAFTS, MUSCLE RE-ATTACHMENTS, REVISION OF SOFT TISSUE ATTACHMENT, AND MANAGEMENT OF HYPERTROPHIED AND HYPERPLASTIC TISSUE)

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIM=50-26 F/D RI
 MCM 2336

SURGICAL EXCISION OF REACTIVE INFLAMMATORY LESIONS
 (SCAR TISSUE OR LOCALIZED CONGENITAL LESIONS)

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HCFA COMMON PROCEDURE CODING SYSTEM

D7410 RADICAL EXCISION - LESION DIAMETER UP TO 1.25 CM

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIM=50-26 F/D RI
 NCM 2336

D7420 RADICAL EXCISION - LESION DIAMETER OVER 1.25 CM

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIM=50-26 F/D RI
 NCM 2336

REMOVAL OF TUMORS, CYSTS, AND NEOPLASMS

D7430 EXCISION OF BENIGN TUMOR - LESION DIAMETER UP TO 1.25 CM

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIM=50-26 F/D RI
 NCM 2336

D7431 EXCISION OF BENIGN TUMOR - LESION DIAMETER OVER 1.25 CM

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIM=50-26 F/D RI
 NCM 2336

D7440 EXCISION OF MALIGNANT TUMOR - LESION DIAMETER UP TO 1.25 CM

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIM=50-26 F/D RI
 NCM 2336

D7441 EXCISION OF MALIGNANT TUMOR - LESION DIAMETER OVER 1.25 CM

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIM=50-26 F/D RI
 NCM 2336

D7450 REMOVAL OF ODONTOGENIC CYST OR TUMOR - LESION DIAMETER UP TO 1.25 CM

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIM=50-26 F/D RI
 NCM 2336

D7451 REMOVAL OF ODONTOGENIC CYST OR TUMOR - LESION DIAMETER OVER 1.25 CM

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIM=50-26 F/D RI
 NCM 2336

D7460 REMOVAL OF NONODONTOGENIC CYST OR TUMOR - LESION DIAMETER UP TO 1.25 CM

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIM=50-26 F/D RI
 NCM 2336

D7461 REMOVAL OF NONODONTOGENIC CYST OR TUMOR - LESION DIAMETER OVER 1.25 CM

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIM=50-26 F/D RI
 NCM 2336

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D7465 DESTRUCTION OF LESION(S) BY PHYSICAL METHODS: ELECTROSURGERY,
CHEMOTHERAPY, CRYOTHERAPY, OR LASER

EXCISION OF BONE TISSUE

D7470 REMOVAL OF EXOSTOSIS - MAXILLA OR MANDIBLE

D7480 PARTIAL OSTECTOMY (OUTTERING OR SAUCERIZATION)

D7490 RADICAL RESECTION OF MANDIBLE WITH BONE GRAFT

SURGICAL INCISION

D7510 INCISION AND DRAINAGE OF ABSCESS - INTRAORAL SOFT TISSUE

D7520 INCISION AND DRAINAGE OF ABSCESS - EXTRAORAL SOFT TISSUE

D7530 REMOVAL OF FOREIGN BODY, SKIN, OR SUBCUTANEOUS AREOLAR TISSUE

D7540 REMOVAL OF REACTION-PRODUCING FOREIGN BODIES - MUSCULOSKELETAL
SYSTEM

D7550 SEQUESTRECTOMY FOR OSTEOMYELITIS

D7560 MAXILLARY SINUSOTOMY FOR REMOVAL OF TOOTH FRAGMENT OR FOREIGN
BODY

HCFA COMMON PROCEDURE CODING SYSTEM

M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIM=50-26 F/D RI
NCM 2336

M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIM=50-26 F/D RI
NCM 2336

M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIM=50-26 F/D RI
NCM 2336

M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIM=50-26 F/D RI
NCM 2336

M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIM=50-26 F/D RI
NCM 2336

M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIM=50-26 F/D RI
NCM 2336

M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIM=50-26 F/D RI
NCM 2336

M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIM=50-26 F/D RI
NCM 2336

M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIM=50-26 F/D RI
NCM 2336

M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIM=50-26 F/D RI
NCM 2336

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HCFA COMMON PROCEDURE CODING SYSTEM

TREATMENT OF FRACTURES - SIMPLE

D7610 MAXILLA - OPEN REDUCTION (TEETH IMMOBILIZED IF PRESENT)

```

M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIM=50-26 F/D RI
NCM 2336

```

D7620 MAXILLA - CLOSED REDUCTION (TEETH IMMOBILIZED IF PRESENT)

```

M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIM=50-26 F/D RI
NCM 2336

```

D7630 MANDIBLE - OPEN REDUCTION (TEETH IMMOBILIZED IF PRESENT)

```

M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIM=50-26 F/D RI
NCM 2336

```

D7640 MANDIBLE - CLOSED REDUCTION (TEETH IMMOBILIZED IF PRESENT)

```

M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIM=50-26 F/D RI
NCM 2336

```

D7650 MALAR AND/OR ZYGOMATIC ARCH - OPEN REDUCTION

```

M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIM=50-26 F/D RI
NCM 2336

```

D7660 MALAR AND/OR ZYGOMATIC ARCH - CLOSED REDUCTION

```

M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIM=50-26 F/D RI
NCM 2336

```

D7670 ALVEOLUS - STABILIZATION OF TEETH, OPEN REDUCTION SPLINTING

```

M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIM=50-26 F/D RI
NCM 2336

```

D7680 FACIAL BONES - COMPLICATED REDUCTION WITH FIXATION AND MULTIPLE SURGICAL APPROACHES

```

M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIM=50-26 F/D RI
NCM 2336

```

TREATMENT OF FRACTURES - COMPOUND

D7710 MAXILLA - OPEN REDUCTION

```

M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIM=50-26 F/D RI
NCM 2336

```

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HCFA COMMON PROCEDURE CODING SYSTEM

D7720 MAXILLA - CLOSED REDUCTION

```

* M/D=1189 A/C=F COV=D DCA
* ILC SP=D SA
* CIM=50-26 F/D RI
* NCM 2336

```

D7730 MANDIBLE - OPEN REDUCTION

```

* M/D=1189 A/C=F COV=D DCA
* ILC SP=D SA
* CIM=50-26 F/D RI
* NCM 2336

```

D7740 MANDIBLE - CLOSED REDUCTION

```

* M/D=1189 A/C=F COV=D DCA
* ILC SP=D SA
* CIM=50-26 F/D RI
* NCM 2336

```

D7750 MALAR AND/OR ZYGOMATIC ARCH - OPEN REDUCTION

```

* M/D=1189 A/C=F COV=D DCA
* ILC SP=D SA
* CIM=50-26 F/D RI
* NCM 2336

```

D7760 MALAR AND/OR ZYGOMATIC ARCH - CLOSED REDUCTION

```

* M/D=1189 A/C=F COV=D DCA
* ILC SP=D SA
* CIM=50-26 F/D RI
* NCM 2336

```

D7770 ALVEOLUS - STABILIZATION OF TEETH, OPEN REDUCTION SPLINTING

```

* M/D=1189 A/C=F COV=D DCA
* ILC SP=D SA
* CIM=50-26 F/D RI
* NCM 2336

```

D7780 FACIAL BONES - COMPLICATED REDUCTION WITH FIXATION AND MULTIPLE SURGICAL APPROACHES

```

* M/D=1189 A/C=F COV=D DCA
* ILC SP=D SA
* CIM=50-26 F/D RI
* NCM 2336

```

REDUCTION OF DISLOCATION AND MANAGEMENT OF OTHER TEMPOROMANDIBULAR JOINT DYSFUNCTIONS

D7810 OPEN REDUCTION OF DISLOCATION

```

* M/D=1189 A/C=F COV=D DCA
* ILC SP=D SA
* CIM=50-26 F/D RI
* NCM 2336

```

D7820 CLOSED REDUCTION OF DISLOCATION

```

* M/D=1189 A/C=F COV=D DCA
* ILC SP=D SA
* CIM=50-26 F/D RI
* NCM 2336

```

D7830 MANIPULATION UNDER ANESTHESIA

```

* M/D=1189 A/C=F COV=D DCA
* ILC SP=D SA
* CIM=50-26 F/D RI
* NCM 2336

```

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HCFA COMMON PROCEDURE CODING SYSTEM

D7840 CONDYLECTOMY

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIM=50-26 F/D RI
 MCM 2336

D7850 MENISECTOMY

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIM=50-26 F/D RI
 MCM 2336

D7860 ARTHROTOMY

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIM=50-26 F/D RI
 MCM 2336

D7870 ARTHROCENTESIS

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIM=50-26 F/D RI
 MCM 2336

D7880 OCCLUSAL ORTHOTIC APPLIANCE

M/D=1189 A/C=F COV=D DCA
 CIM=50-26 F/D RI
 MCM 2336

REPAIR OF TRAUMATIC WOUNDS

D7910 SUTURE OF RECENT SMALL WOUNDS UP TO 5 CM

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIM=50-26 F/D RI
 MCM 2336

COMPLICATED SUTURING (RECONSTRUCTION REQUIRING
 DELICATE HANDLING OF TISSUES AND WIDE UNDERMINING
 FOR METICULOUS CLOSURE)

D7911 SUTURE - UP TO 5 CM

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIM=50-26 F/D RI
 MCM 2336

D7912 SUTURE - OVER 5 CM

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIM=50-26 F/D RI
 MCM 2336

OTHER REPAIR PROCEDURES

D7920 SKIN GRAFTS (IDENTIFY DEFECT COVERED, LOCATION, AND TYPE OF GRAFT)

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIM=50-26 F/D RI
 MCM 2336

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HCFA COMMON PROCEDURE CODING SYSTEM

D7940 OSTEOPLASTY - FOR ORTHOGNATHIC DEFORMITIES

D7941 OSTEOTOMY - RAMUS, CLOSED

D7942 OSTEOTOMY - RAMUS, OPEN

D7943 OSTEOTOMY - RAMUS, OPEN WITH BONE GRAFT

D7944 OSTEOTOMY - SEGMENTED OR SUBAPICAL - PER SEXTANT OR QUADRANT

D7945 OSTEOTOMY - BODY OF MANDIBLE

D7946 LEFORT I (MAXILLA - TOTAL)

D7947 LEFORT I (MAXILLA - SEGMENTED)

D7948 LEFORT II OR LEFORT III (OSTEOPLASTY OF FACIAL BONES FOR MIDFACE
HYPOPLASIA OR RETRUSION) - WITHOUT BONE GRAFT

D7949 LEFORT II OR LEFORT III - WITH BONE GRAFT

D7950 OSSEOUS, OSTEOPERIOSTEAL, PERIOSTEAL, OR CARTILAGE GRAFT OF THE
MANDIBLE - AUTOGENEOUS OR NONAUTOGENEOUS

D7955 REPAIR OF MAXILLOFACIAL SOFT AND HARD TISSUE DEFECTS

M/D=1189	A/C=F	COV=D	DCA
XR4	XR5	IC=R	SLHA
ILC		SP=D	SA
CIN=50-26	F/D	RI	
MCM 2336			
M/D=1189	A/C=F	COV=D	DCA
CIN=50-26	F/D	RI	
MCM 2336			
M/D=1189	A/C=F	COV=D	DCA
CIN=50-26	F/D	RI	
MCM 2336			
M/D=1189	A/C=F	COV=D	DCA
CIN=50-26	F/D	RI	
MCM 2336			
M/D=1189	A/C=F	COV=D	DCA
CIN=50-26	F/D	RI	
MCM 2336			
M/D=1189	A/C=F	COV=D	DCA
CIN=50-26	F/D	RI	
MCM 2336			
M/D=1189	A/C=F	COV=D	DCA
CIN=50-26	F/D	RI	
MCM 2336			
M/D=1189	A/C=F	COV=D	DCA
ILC		SP=D	SA
CIN=50-26	F/D	RI	
MCM 2336			
M/D=1189	A/C=F	COV=D	DCA
ILC		SP=D	SA
CIN=50-26	F/D	RI	
MCM 2336			

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HCFA COMMON PROCEDURE CODING SYSTEM

D7960 FRENULECTOMY (FRENECTOMY OR FRENOTOMY) - SEPARATE PROCEDURE

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIM=50-26 F/D RI
 NCM 2336

D7970 EXCISION OF HYPERPLASTIC TISSUE - PER ARCH

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIM=50-26 F/D RI
 NCM 2336

D7971 EXCISION OF PERICORONAL GINGIVA

M/D=1189 A/C=F COV=D DCA
 CIM=50-26 F/D RI
 NCM 2336

D7980 SIALOLITHOTOMY

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIM=50-26 F/D RI
 NCM 2336

D7981 EXCISION OF SALIVARY GLAND

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIM=50-26 F/D RI
 NCM 2336

D7982 SIALODOCHOPLASTY

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIM=50-26 F/D RI
 NCM 2336

D7983 CLOSURE OF SALIVARY FISTULA

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIM=50-26 F/D RI
 NCM 2336

D7990 EMERGENCY TRACHEOTOMY

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIM=50-26 F/D RI
 NCM 2336

D7991 CORONOIDECTOMY

M/D=1189 A/C=F COV=D DCA
 CIM=50-26 F/D RI
 NCM 2336

D7992 EMINECTOMY

M/D=1189 A/C=F COV=D DCA
 CIM=50-26 F/D RI
 NCM 2336

D7993 IMPLANT - FACIAL BONES (HOMOLOGOUS, HETEROLOGOUS, OR ALLOPLASTIC)

M/D=1189 A/C=F COV=D DCA
 CIM=50-26 F/D RI
 NCM 2336

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HCFA COMMON PROCEDURE CODING SYSTEM

D7994 IMPLANT - CHIN (HOMOLOGOUS, HETEROLOGOUS, OR ALLOPLASTIC)

D7999 UNSPECIFIED ORAL SURGERY PROCEDURE, BY REPORT

D8000-D8999 X. ORTHODONTICS

MINOR TREATMENT FOR TOOTH GUIDANCE

D8110 REMOVABLE APPLIANCE THERAPY

D8120 FIXED APPLIANCE THERAPY

MINOR TREATMENT TO CONTROL HARMFUL HABITS

D8210 REMOVABLE APPLIANCE THERAPY

D8220 FIXED APPLIANCE THERAPY

INTERCEPTIVE ORTHODONTIC TREATMENT

D8360 REMOVABLE APPLIANCE THERAPY

D8370 FIXED APPLIANCE THERAPY

COMPREHENSIVE ORTHODONTIC TREATMENT -
TRANSITIONAL DENTITION

D8460 CLASS I MALOCCLUSION

M/D=1189	A/C=F	COV=D	DCA
CIM=50-26		F/D	RI
NCM 2336			

M/D=1189	A/C=F	COV=D	DCA
ILC			SP=D SA
CIM=50-26		F/D	RI
NCM 2336			

M/D=1189	A/C=F	COV=D	DCA
ILC			SP=D SA
CIM=50-26		F/D	RI
NCM 2336			

M/D=1189	A/C=F	COV=D	DCA
ILC			SP=D SA
CIM=50-26		F/D	RI
NCM 2336			

M/D=1189	A/C=F	COV=D	DCA
ILC			SP=D SA
CIM=50-26		F/D	RI
NCM 2336			

M/D=1189	A/C=F	COV=D	DCA
ILC			SP=D SA
CIM=50-26		F/D	RI
NCM 2336			

M/D=1189	A/C=F	COV=D	DCA
ILC			SP=D SA
CIM=50-26		F/D	RI
NCM 2336			

M/D=1189	A/C=F	COV=D	DCA
ILC			SP=D SA
CIM=50-26		F/D	RI
NCM 2336			

M/D=1189	A/C=F	COV=D	DCA
ILC			SP=D SA
CIM=50-26		F/D	RI
NCM 2336			

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HCFA COMMON PROCEDURE CODING SYSTEM

D0470 CLASS II MALOCCLUSION

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIN=50-26 F/D RI
 MCM 2336

D0490 CLASS III MALOCCLUSION

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIN=50-26 F/D RI
 MCM 2336

COMPREHENSIVE ORTHODONTIC TREATMENT-
 PERMANENT DENTITION

D0560 CLASS I MALOCCLUSION

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIN=50-26 F/D RI
 MCM 2336

D0570 CLASS II MALOCCLUSION

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIN=50-26 F/D RI
 MCM 2336

D0580 CLASS III MALOCCLUSION

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIN=50-26 F/D RI
 MCM 2336

OTHER ORTHODONTIC SERVICES

D0650 TREATMENT OF THE ATYPICAL OR EXTENDED SKELETAL CASE

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIN=50-26 F/D RI
 MCM 2336

D0750 POST-TREATMENT STABILIZATION

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIN=50-26 F/D RI
 MCM 2336

D0999 UNSPECIFIED ORTHODONTIC PROCEDURE, BY REPORT

M/D=1189 A/C=F COV=D DCA
 ILC SP=D SA
 CIN=50-26 F/D RI
 MCM 2336

D9000-D9999 XI. ADJUNCTIVE GENERAL SERVICES

UNCLASSIFIED TREATMENT

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HCFA COMMON PROCEDURE CODING SYSTEM

D9110 PALLIATIVE (EMERGENCY) TREATMENT OF DENTAL PAIN - MINOR PROCEDURES

ANESTHESIA

D9210 LOCAL ANESTHESIA NOT IN CONJUNCTION WITH OPERATIVE OR SURGICAL PROCEDURES

D9211 REGIONAL BLOCK ANESTHESIA

D9212 TRIGEMINAL DIVISION BLOCK ANESTHESIA

D9215 LOCAL ANESTHESIA

D9220 GENERAL ANESTHESIA

D9230 ANALGESIA

D9240 INTRAVENOUS SEDATION

PROFESSIONAL CONSULTATION (DIAGNOSTIC SERVICE PROVIDED
BY DENTIST OR PHYSICIAN OTHER THAN PRACTITIONER PRO-
VIDING TREATMENT)

D9310 CONSULTATION - PER SESSION

PROFESSIONAL VISITS

M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIM=50-26 F/D RI
MCN 2336

M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIM=50-26 F/D RI
MCN 2336

M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIM=50-26 F/D RI
MCN 2336

M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIM=50-26 F/D RI
MCN 2336

M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIM=50-26 F/D RI
MCN 2336

M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIM=50-26 F/D RI
MCN 2336

M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIM=50-26 F/D RI
MCN 2336

M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIM=50-26 F/D RI
MCN 2336

M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
CIM=50-26 F/D RI
MCN 2336

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HCFA COMMON PROCEDURE CODING SYSTEM

D9410 HOUSE CALL

D9420 HOSPITAL CALL

D9430 OFFICE VISIT FOR OBSERVATION (DURING REGULARLY SCHEDULED HOURS)
- NO OTHER SERVICES PERFORMED

D9440 OFFICE VISIT - AFTER REGULARLY SCHEDULED HOURS

DRUGS

D9610 THERAPEUTIC DRUG INJECTION, BY REPORT

D9630 OTHER DRUGS AND/OR MEDICAMENTS, BY REPORT

MISCELLANEOUS SERVICES

D9910 APPLICATION OF DESENSITIZING MEDICAMENTS

D9920 BEHAVIOR MANAGEMENT, BY REPORT

D9930 TREATMENT OF COMPLICATIONS (POSTSURGICAL) - UNUSUAL
CIRCUMSTANCES, BY REPORT

D9940 OCCLUSAL GUARDS, BY REPORT

*
* M/D=1189 A/C=F COV=D DCA
* ILC SP=D SA
* CIM=50-26 F/D RI
* MCN 2336

*
* M/D=1189 A/C=F COV=D DCA
* ILC SP=D SA
* CIM=50-26 F/D RI
* MCN 2336

*
* M/D=1189 A/C=F COV=D DCA
* ILC SP=D SA
* CIM=50-26 F/D RI
* MCN 2336

*
* M/D=1189 A/C=F COV=D DCA
* ILC SP=D SA
* CIM=50-26 F/D RI
* MCN 2336

*
* M/D=1189 A/C=F COV=D DCA
* ILC SP=D SA
* CIM=50-26 F/D RI
* MCN 2336

*
* M/D=1189 A/C=F COV=D DCA
* ILC SP=D SA
* CIM=50-26 F/D RI
* MCN 2336

*
* M/D=1189 A/C=F COV=D DCA
* ILC SP=D SA
* CIM=50-26 F/D RI
* MCN 2336

*
* M/D=1189 A/C=F COV=D DCA
* ILC SP=D SA
* CIM=50-26 F/D RI
* MCN 2336

*
* M/D=1189 A/C=F COV=D DCA
* ILC SP=D SA
* CIM=50-26 F/D RI
* MCN 2336

*
* M/D=1189 A/C=F COV=D DCA
* ILC SP=D SA
* CIM=50-26 F/D RI
* MCN 2336

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HCFA COMMON PROCEDURE CODING SYSTEM

D9941 FABRICATION OF ATHLETIC MOUTHGUARDS

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* M/D=1189 A/C=F COV=D DCA
* CIM=50-26 F/D RI
* MCM 2336

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D9950 OCCLUSION ANALYSIS - MOUNTED CASE

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* M/D=1189 A/C=F COV=D DCA
* ILC SP=D SA
* CIM=50-26 F/D RI
* MCM 2336

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D9951 OCCLUSAL ADJUSTMENT - LIMITED

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* M/D=1189 A/C=F COV=D DCA
* CIM=50-26 F/D RI
* MCM 2336

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D9952 OCCLUSAL ADJUSTMENT - COMPLETE

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* M/D=1189 A/C=F COV=D DCA
* CIM=50-26 F/D RI
* MCM 2336

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D9960 COMPLETION OF CLAIM FORM

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* M/D=1189 A/C=F COV=D DCA
* ILC SP=D SA
* CIM=50-26 F/D RI
* MCM 2336

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HCEA COMMON PROCEDURE CODING SYSTEM

* M/D=1189 A/C=F COV=D DCA
* ILC SP=D SA
* CIM=50-26 F/D RI
* MCM 2386

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DURABLE MEDICAL EQUIPMENT

CANES

E0100 CANE, INCLUDES CANES OF ALL MATERIALS, ADJUSTABLE OR FIXED, WITH TIP

E0105 CANE, QUAD OR THREE PRONG, INCLUDES CANES OF ALL MATERIALS, ADJUSTABLE OR FIXED, WITH TIPS

CRUTCHES

E0110 CRUTCHES, FOREARM, INCLUDES CRUTCHES OF VARIOUS MATERIALS, ADJUSTABLE OR FIXED, PAIR, COMPLETE WITH TIPS AND HANDGRIPS

E0111 CRUTCH FOREARM, INCLUDES CRUTCHES OF VARIOUS MATERIALS, ADJUSTABLE OR FIXED, EACH, WITH TIP AND HANDGRIPS

E0112 CRUTCHES UNDERARM, WOOD, ADJUSTABLE OR FIXED, PAIR, WITH PADS, TIPS AND HANDGRIPS

E0113 CRUTCH UNDERARM, WOOD, ADJUSTABLE OR FIXED, EACH, WITH PAD, TIP AND HANDGRIP

E0114 CRUTCHES UNDERARM, ALUMINUM, ADJUSTABLE OR FIXED, PAIR, WITH PADS, TIPS AND HANDGRIPS

E0116 CRUTCH UNDERARM, ALUMINUM, ADJUSTABLE OR FIXED, EACH, WITH PAD, TIP AND HANDGRIP

WALKERS

E0130 WALKER, RIGID (PICKUP), ADJUSTABLE OR FIXED HEIGHT

M/D=1189 A/C=F COV=D DCA
CHTS RVU= .77 A/V
CIM=60-3 F/D RI
MCM 2100.1

M/D=1189 A/C=F COV=D DCA
CHTS RVU= .92 A/V
CIM=60-15 F/D RI
MCM 2100.1

M/D=1189 A/C=F COV=D DCA
CHTS RVU= 1.45 A/V
CIM=60-9 F/D RI
MCM 2100.1

M/D=1189 A/C=F COV=D DCA
CIM=60-9 F/D RI
MCM 2100.1

M/D=1189 A/C=F COV=D DCA
CIM=60-9 F/D RI
MCM 2100.1

M/D=1189 A/C=F COV=D DCA
CIM=60-9 F/D RI
MCM 2100.1

M/D=1189 A/C=F COV=D DCA
CIM=60-9 F/D RI
MCM 2100.1

M/D=1189 A/C=F COV=D DCA
CIM=60-9 F/D RI
MCM 2100.1

M/D=1189 A/C=F COV=D DCA
CHTS RVU= 3.13 A/V
CIM=60-15 60-9 F/D RI
MCM 2100.1

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HCFA COMMON PROCEDURE CODING SYSTEM

E0185 WALKER, FOLDING (PICKUP), ADJUSTABLE OR FIXED HEIGHT

M/D=1189 A/C=F COV=D DCA
 CNTS RVU= 3.18 A/V
 CIM=60-15 60-9 F/D RI
 MCM 2100.1

E0141 WALKER, WHEELED, WITHOUT SEAT

M/D=1189 A/C=F COV=D DCA
 CIM=60-15 60-9 F/D RI
 MCM 2100.1

E0142 RIGID WALKER, WHEELED, WITH SEAT

M/D=1189 A/C=F COV=D DCA
 CIM=60-15 60-9 F/D RI
 MCM 2100.1

E0143 FOLDING WALKER, WHEELED, WITHOUT SEAT

M/D=1189 A/C=F COV=D DCA
 CIM=60-15 60-9 F/D RI
 MCM 2100.1

E0145 WALKER, WHEELED, WITH SEAT AND CRUTCH ATTACHMENTS

M/D=1189 A/C=F COV=D DCA
 CNTS RVU= 9.74 A/V
 CIM=60-15 60-9 F/D RI
 MCM 2100.1

E0146 WALKER, WHEELED, WITH SEAT

M/D=1189 A/C=F COV=D DCA
 CIM=60-15 60-9 F/D RI
 MCM 2100.1

E0147 HEAVY DUTY, MULTIPLE BREAKING SYSTEM, VARIABLE WHEEL RESISTANCE WALKER

M/D=1189 A/C=F COV=D DCA
 CIM=60-15 F/D RI
 MCM 2100.1

ACCESSORIES FOR AMBULATION DEVICES

M/D= 986 A/C=E DCA

E0150 UNDERARM PAD, CRUTCH, REPLACEMENT, EACH

M/D= 986 A/C=E COV=D DCA
 CNTS RVU= .37 A/V
 CIM=60-15 60-9 F/D RI

E0151 HANDGRIP, CANE, CRUTCH, OR WALKER REPLACEMENT, EACH

M/D=1189 A/C=F COV=D DCA
 CIM=60-15 60-9 F/D RI

E0152 TIP, CANE OR CRUTCH WALKER REPLACEMENT, EACH

M/D=1189 A/C=F COV=D DCA
 CIM=60-15 60-9 F/D RI

E0153 PLATFORM ATTACHMENT, FOREARM CRUTCH, EACH

M/D=1189 A/C=F COV=D DCA
 CIM=60-15 60-9 F/D RI

E0154 PLATFORM ATTACHMENT, WALKER, EACH

M/D=1189 A/C=F COV=D DCA
 CIM=60-15 60-9 F/D RI

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E0155 WHEEL ATTACHMENT, RIGID PICK-UP WALKER

ATTACHMENTS

E0156 SEAT ATTACHMENT, WALKER

E0157 CRUTCH ATTACHMENT, WALKER, EACH

E0158 LEG EXTENSIONS FOR A WALKER

COMMODOES

E0160 SITZ TYPE BATH, PORTABLE, FITS OVER COMMODOE SEAT

E0161 SITZ TYPE BATH, PORTABLE, FITS OVER COMMODOE SEAT,
WITH FAUCET ATTACHMENTS

E0162 SITZ BATH CHAIR

E0163 COMMODOE CHAIR, STATIONARY, WITH FIXED ARMS

E0164 COMMODOE CHAIR, MOBILE, WITH FIXED ARMS

E0165 COMMODOE CHAIR, STATIONARY, WITH DETACHABLE ARMS

E0166 COMMODOE CHAIR, MOBILE, WITH DETACHABLE ARMS

E0167 PAIL OR PAN FOR USE WITH COMMODOE CHAIR

HCFA COMMON PROCEDURE CODING SYSTEM

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M/D=1189 A/C=F COV=D DCA
CNTS RVU= .92 A/V
CIM=60-15 60-9 F/D RI

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M/D=1189 A/C=F COV=D DCA
CIM=60-15 60-9 F/D RI

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M/D=1189 A/C=F COV=D DCA
CIM=60-15 60-9 F/D RI

```

```

M/D=1189 A/C=F COV=D DCA
CIM=60-15 60-9 F/D RI

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M/D=1188 A/C=C COV=D DCA
CNTS RVU= 2.02 A/V
CIM=60-9 F/D RI

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M/D=1188 A/C=C COV=D DCA
CIM=60-9 F/D RI

```

```

M/D=1188 A/C=C COV=D DCA
CIM=60-9 F/D RI

```

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M/D=1189 A/C=F COV=D DCA
CIM=60-9 F/D RI
MCM 2100.1

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M/D=1189 A/C=F COV=D DCA
CIM=60-9 F/D RI
MCM 2100.1

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```

M/D=1189 A/C=F COV=D DCA
CNTS RVU= 2.06 A/V
CIM=60-9 F/D RI
MCM 2100.1

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```

M/D=1189 A/C=F COV=D DCA
CIM=60-9 F/D RI
MCM 2100.1

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```

M/D=1188 A/C=C COV=D DCA
CIM=60-9 F/D RI

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HCFA COMMON PROCEDURE CODING SYSTEM

E0175 FOOT REST, FOR USE WITH COMMUNE CHAIR, EACH

DECUBITUS CARE EQUIPMENT

E0180 PRESSURE PAD, ALTERNATING WITH PUMP

E0181 PRESSURE PAD, ALTERNATING WITH PUMP, HEAVY DUTY

E0182 PUMP FOR ALTERNATING PRESSURE PAD

E0183 FLOTATION PAD FOR WHEELCHAIR

E0184 FLOTATION MATTRESS, DRY

E0185 DECUBITUS CARE PAD, FLOTATION OR GEL PAD WITH FOAM LEVELING PAD
(MATTRESS SIZE)

E0188 SYNTHETIC SHEEPSKIN PAD

E0189 LAMBSWOOL SHEEPSKIN PAD, ANY SIZE

E0190 DECUBITUS CARE MATTRESS, INCLUDES FLOTATION OR GEL
MATTRESS

E0191 HEEL OR ELBOW PROTECTOR, EACH

E0192 LOW PRESSURE AND POSITIONING EQUALIZATION PAD FOR WHEELCHAIR

E0193 POWERED AIR FLOTATION BED (LOW AIR LOSS THERAPY)

E0195 REPLACEMENT PAD FOR USE WITH MEDICALLY NECESSARY ALTERNATING
PRESSURE PAD OWNED BY THE PATIENTM/D=1188 A/C=C COV=D DCA
CNTS RVU= RNE A/VM/D=1188 A/C=C COV=D DCA
CNTS RVU= 10.70 A/V
CIM=60-9 F/D RIM/D=1188 A/C=C COV=D DCA
CNTS RVU= 10.70 A/V
CIM=60-9 F/D RIM/D=1188 A/C=C COV=D DCA
CIM=60-9 F/D RIM/D=1188 A/C=C COV=D DCA
CIM=60-9 F/D RIM/D=1188 A/C=C COV=D DCA
CIM=60-9 F/D RIM/D=1188 A/C=C COV=D DCA
CNTS RVU= 2.94 A/V
CIM=60-9 F/D RIM/D=1188 A/C=C COV=D DCA
CIM=60-9 F/D RIM/D=1188 A/C=C COV=D DCA
CIM=60-9 F/D RIM/D=1188 A/C=C COV=D DCA
CNTS RVU= 5.51 A/V
CIM=60-9 F/D RIM/D=1188 A/C=C COV DCA
CIM=60-9 F/D RIM/D=1188 A/C=C COV=D DCA
CIM=60-9 F/D RIM/D=1189 A/C=A COV=D DCA=90
NCM 2100.2 4105.2M/D=1188 A/C=C COV=D DCA
CNTS RVU= RNE A/V
CIM=60-9 F/D RI

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HCFA COMMON PROCEDURE CODING SYSTEM

HEAT/COLD APPLICATION E0200 - E0289

E0200 HEAT LAMP, WITHOUT STAND (TABLE MODEL), INCLUDES BULB, OR
INFRARED ELEMENT

E0202 PHOTOTHERAPY (BILIRUBIN) LIGHT WITH PHOTOMETER

E0205 HEAT LAMP, WITH STAND, INCLUDES BULB, OR INFRARED ELEMENT

E0210 ELECTRIC HEAT PAD, STANDARD

E0215 ELECTRIC HEAT PAD, MOIST

E0220 HOT WATER BOTTLE

E0225 HYDROCOLLATOR UNIT, INCLUDES PADS

E0230 ICE CAP OR COLLAR

E0235 PARAFFIN BATH UNIT, PORTABLE (SEE MEDICAL SUPPLY CODE A4265
FOR PARAFFIN)

E0236 PUMP FOR WATER CIRCULATING PAD

E0237 WATER CIRCULATING HEAT PAD WITH PUMP

E0238 NON-ELECTRIC HEAT PAD, MOIST

E0239 HYDROCOLLATOR UNIT, PORTABLE

M/D=1189 A/C=F COV=D DCA
 CNTS RVU= .74 A/V
 CIM=60-9 F/D RI
 MCM 2100.1

M/D=1184 A/C COV DCA

M/D=1189 A/C=F COV=D DCA
 CNTS RVU= .92 A/V
 CIM=60-9 F/D RI
 MCM 2100.1

M/D=1188 A/C=C COV=D DCA
 CNTS RVU= .55 A/V
 CIM=60-9 F/D RI

M/D=1188 A/C=C COV=D DCA
 CNTS RVU= 1.62 A/V
 CIM=60-9 F/D RI

M/D=1188 A/C=C COV DCA
 CNTS RVU= BR A/V

M/D=1189 A/C=F COV=D DCA
 CNTS RVU= BR A/V
 CIM=60-9 F/D RI
 MCM 2210.3

M/D=1188 A/C=C COV DCA
 CNTS RVU= BR A/V

M/D=1189 A/C=F COV=D DCA
 CIM=60-9 F/D RI
 MCM 2210.3

M/D=1188 A/C=E COV=D DCA
 CIM=60-9 F/D RI

M/D=1188 A/C=E COV=D DCA
 CIM=60-9 F/D RI

M/D=1188 A/C=E COV=D DCA
 CIM=60-9 F/D RI

M/D=1189 A/C=F COV=D DCA
 CIM=60-9 F/D RI
 MCM 2210.3

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HCFA COMMON PROCEDURE CODING SYSTEM

BATH AND TOILET AIDS

E0241 BATH TUB WALL RAIL, EACH

E0242 BATH TUB RAIL, FLOOR BASE

E0243 TOILET RAIL, EACH

E0244 RAISED TOILET SEAT

E0245 TUB STOOL OR BENCH

E0246 TRANSFER TUB RAIL ATTACHMENT

E0249 PAD FOR WATER CIRCULATING HEAT UNIT

*	M/D=	986	A/C=A		DCA
*	M/D=	1188	A/C=C	COV	DCA
*	M/D=	1188	A/C=C	COV	DCA
*	M/D=	1188	A/C=C	COV	DCA
*	M/D=	1188	A/C=E	COV=M	DCA
*	CIM=	60-9		F/D	RI
*	M/D=	1188	A/C=E	COV=M	DCA
*	CIM=	60-9		F/D	RI
*	M/D=	1188	A/C=C	COV	DCA
*	M/D=	1188	A/C=C	COV=D	DCA
*	CIM=	60-9		F/D	RI

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HCFA COMMON PROCEDURE CODING SYSTEM

HOSPITAL BEDS

E0250 HOSPITAL BED, WITH SIDE RAILS, FIXED HEIGHT, WITH MATTRESS

E0251 HOSPITAL BED, WITH SIDE RAILS, FIXED HEIGHT, WITHOUT MATTRESS

E0252 HOSPITAL BED, FIXED HEIGHT, WITH MATTRESS

E0255 HOSPITAL BED, WITH SIDE RAILS VARIABLE HEIGHT, HI-LO, WITH MATTRESS

E0260 HOSPITAL BED, WITH SIDE RAILS, SEMI-ELECTRIC, HEAD AND FOOT ADJUSTMENT, WITH MATTRESS

E0265 HOSPITAL BED, TOTAL ELECTRIC WITH SIDERAILS (HEAD, FOOT AND HEIGHT ADJUSTMENTS, WITH MATTRESS)

E0266 HOSPITAL BED, WITH SIDE RAILS, TOTAL ELECTRIC HEAD, FOOT, AND HEIGHT ADJUSTMENTS, WITHOUT MATTRESS

E0270 HOSPITAL BED, INSTITUTIONAL TYPE INCLUDES: OSCILLATING, CIRCULATING AND STRYKER FRAME, WITH MATTRESS

E0271 MATTRESS, INNERSPRING

E0272 MATTRESS, FOAM RUBBER

E0273 BED BOARD

E0274 OVER-BED TABLE

M/D=1189 A/C=F COV=D DCA
CNTS RVU= 14.70 A/V
CIM=60-18 F/D RI
MCM 2100.1

M/D=1189 A/C=F COV=D DCA
CIM=60-18 F/D RI
MCM 2100.1

M/D=1189 A/C=F COV=D DCA
CIM=60-18 F/D RI
MCM 2100.1

M/D=1189 A/C=F COV=D DCA
CNTS RVU= 18.40 A/V
CIM=60-18 F/D RI
MCM 2100.1

M/D=1189 A/C=F COV=D DCA
CNTS RVU= 33.10 A/V
CIM=60-18 F/D RI
MCM 2100.1

M/D=1189 A/C=F COV=D DCA
CNTS RVU= 33.10 A/V
CIM=60-18 F/D RI
MCM 2100.1

M/D=1189 A/C=F COV=D DCA
CIM=60-18 F/D RI
MCM 2100.1

M/D=1189 A/C=F COV=D DCA
CNTS RVU= BR A/V
CIM=60-18 F/D RI
MCM 2100.1

M/D=1189 A/C=F COV=D DCA
CIM=60-18 F/D RI

M/D=1189 A/C=F COV=D DCA
CIM=60-18 F/D RI

M/D=1188 A/C=E COV=M DCA
CIM=60-9 F/D RI

M/D=1188 A/C=E COV=M DCA
CIM=60-9 F/D RI

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HCFA COMMON PROCEDURE CODING SYSTEM

E0275 BED PAN, STANDARD, METAL OR PLASTIC

E0276 BED PAN, FRACTURE, METAL OR PLASTIC

E0280 BED CRADLE, ANY TYPE

HOSPITAL BED ACCESSORIES

E0305 BED SIDE RAILS, HALF LENGTH

E0310 BED SIDE RAILS, FULL LENGTH

E0315 BED ACCESSORIES: BOARDS OR TABLES, ANY TYPE

E0325 URINAL; MALE, JUG-TYPE, ANY MATERIAL

E0326 URINAL; FEMALE, JUG-TYPE, ANY MATERIAL

E0330 URINAL, MALE, DAY/NIGHT

OXYGEN AND RELATED RESPIRATORY EQUIPMENT

E0400 OXYGEN CONTENTS, GASEOUS, PER CUBIC FOOT (INCLUDES ALL CHARGES FOR USE OF THE CONTAINER)

E0405 OXYGEN CONTENTS, GASEOUS, PER 100 CUBIC FEET (INCLUDES ALL CHARGES FOR USE OF THE CONTAINER)

```

*      M/D=1188 A/C=C COV=D DCA
*      CIN=60-9 F/D RI
*
*      M/D=1188 A/C=C COV=D DCA
*      CIN=60-9 F/D RI
*
*      M/D=1188 A/C=C COV DCA
*      CHTS RVU= 8R A/V
*
*
*      M/D=1189 A/C=F COV=D DCA
*      CHTS RVU= 3.13 A/V
*      CIN=60-18 F/D RI
*
*      M/D=1189 A/C=F COV=D DCA
*      CHTS RVU= 3.30 A/V
*      CIN=60-18 F/D RI
*
*      M/D=1188 A/C=E COV=M DCA
*      CHTS RVU= BR A/V
*      CIN=60-9 F/D RI
*
*      M/D=1189 A/C=C COV=D DCA
*      CHTS RVU= .18 A/V
*      CIN=60-9 F/D RI
*      NCM 2303
*
*      M/D=1189 A/C=C COV=D DCA
*      CIN=60-9 F/D RI
*      NCM 2303
*
*      M/D=1189 A/C=D COV=D DCA
*      CHTS RVU= 1.14 A/V
*      CIN=60-9 F/D RI
*
*
*
*
*      M/D=1189 A/C=F COV=D DCA
*      XR1=Q0038 XR2 XR3
*      CHTS RVU= .30 A/V
*      CIN=60-4 F/D RI
*      NCM 4107.9
*
*      M/D=1189 A/C=F COV=D DCA
*      XR1=Q0038 XR2 XR3
*      CIN=60-4 F/D RI
*      NCM 4107.9

```


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HCFA COMMON PROCEDURE CODING SYSTEM

E0410 OXYGEN CONTENTS, LIQUID, PER POUND

```

* M/D=1189 A/C=F COV=D DCA
* XR1=Q0089 XR2 XR3
* CNTS RVU= .04 A/V
* CIM=60-4 F/D RI
* MCM 4107.9

```

E0415 OXYGEN CONTENTS, LIQUID, PER 100 POUNDS

```

* M/D=1189 A/C=F COV=D DCA
* XR1=Q0089 XR2 XR3
* CIM=60-4 F/D RI
* MCM 4107.9

```

E0416 OXYGEN REFILL FOR PORTABLE GASEOUS SYSTEMS ONLY, UP TO 23 CUBIC FEET, (INCLUDES ALL CHARGES FOR USE OF THE CONTAINER)

```

* M/D=1189 A/C=F COV=D DCA
* XR1=Q0040 XR2 XR3
* CIM=60-4 F/D RI
* MCM 4107.9

```

E0425 STATIONARY COMPRESSED GAS SYSTEM, INCLUDES REGULATOR WITH FLOW GAUGE, HUMIDIFIER, CANNULA OR MASK AND TUBING

```

* M/D=1189 A/C=F COV=D DCA
* XR1=Q0042 XR2 XR3
* CNTS RVU= RNE A/V
* CIM=60-4 F/D RI
* MCM 4107.9 2100.1

```

E0430 PORTABLE GASEOUS OXYGEN SYSTEM, INCLUDES REGULATOR WITH FLOW GAUGE, HUMIDIFIER, CANNULA OR MASK AND TUBING

```

* M/D=1189 A/C=F COV=D DCA
* CNTS RVU= 5.86 A/V
* CIM=60-9 60-4 F/D RI
* MCM 4107.9

```

E0435 OXYGEN SYSTEM, LIQUID, PORTABLE, INCLUDES PORTABLE CONTAINER, SUPPLY RESERVOIR, FLOW HUMIDIFIER, CANNULA OR MASKS, TUBING AND REFILL ADAPTOR

```

* M/D=1189 A/C=F COV=D DCA
* CNTS RVU= BR A/V
* CIM=60-4 F/D RI
* MCM 4107.9

```

E0440 OXYGEN SYSTEM, LIQUID, STATIONARY, INCLUDES USE OF RESERVOIR, CONTENTS INDICATOR, FLOWMETER, HUMIDIFIER, CANNULA OR MASK AND TUBING

```

* M/D=1189 A/C=F COV=D DCA
* CNTS RVU= RNE A/V
* CIM=60-4 F/D RI
* MCM 4107

```

E0450 VOLUME VENTILATOR; STATIONARY

```

* M/D=1189 A/C=C COV=D DCA
* XR4 XR5 IC=R SLHA
* CNTS RVU= BR A/V
* CIM=60-4 60-9 F/D RI

```

E0451 VOLUME VENTILATOR; PORTABLE (INCLUDES BATTERY, BATTERY CHARGER AND BATTERY CABLES)

```

* M/D=1189 A/C=C COV=D DCA
* CIM=60-4 60-9 F/D RI

```

E0455 OXYGEN TENT, EXCLUDING CROUP OR PEDIATRIC TENTS

```

* M/D=1189 A/C=F COV=D DCA
* CNTS RVU= BR A/V
* CIM=60-4 F/D RI
* MCM 4107.9

```

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HCFA COMMON PROCEDURE CODING SYSTEM

E0456 CHEST CUIRASS, WITH PUMP

E0457 CHEST SHELL (CUIRASS)

E0458 NEGATIVE PRESSURE PUMP

E0459 CHEST WRAP

E0460 NEGATIVE PRESSURE VENTILATOR; PORTABLE (EQ., PORTA-LUNG)

E0461 NEGATIVE PRESSURE VENTILATOR; STATIONARY (EQ., IRON LUNG)

E0462 ROCKING BED WITH OR WITHOUT SIDE RAILS

E0480 PERCUSSOR, ELECTRIC OR PNEUMATIC, HOME MODEL

IPPB MACHINES

E0500 IPPB MACHINES WITH MANUAL VALVES EXTERNAL POWER SOURCE, INCLUDES CYLINDER REGULATOR, BUILT-IN NEBULIZATION

E0505 IPPB MACHINES WITH MANUAL VALVES ELECTRICALLY DRIVEN WITH INTERNAL POWER SOURCE, BUILT-IN NEBULIZATION

E0510 IPPB MACHINES WITH AUTOMATIC VALVES, EXTERNAL POWER SOURCE INCLUDES CYLINDER REGULATOR, BUILT-IN NEBULIZATION

E0515 IPPB MACHINES WITH AUTOMATIC VALVES, ELECTRICALLY DRIVEN WITH INTERNAL COMPRESSOR, BUILT-IN NEBULIZATION

HUMIDIFIERS/NEBULIZERS FOR USE WITH OXYGEN IPPB EQUIPMENT

COMPRESSORS

E0550 HUMIDIFIER, DURABLE FOR EXTENSIVE SUPPLEMENTAL HUMIDIFICATION DURING IPPB TREATMENTS OR OXYGEN DELIVERY, E.G., CASCADE

*	M/D=1189	A/C=D	COV	DCA
*	M/D=1189	A/C=A	COV=D	DCA=90
*	CIM=60-4	60-9	F/D	RI
*	M/D=1189	A/C=A	COV=D	DCA=90
*	CIM=60-4		F/D	RI
*	M/D=1189	A/C=A	COV=D	DCA=90
*	CIM=60-4		F/D	RI
*	M/D=1189	A/C=A	COV=D	DCA=90
*	CIM=60-4		F/D	RI
*	M/D=1189	A/C=A	COV=D	DCA=90
*	CIM=60-4		F/D	RI
*	M/D=1189	A/C=A	COV=D	DCA=90
*	CIM=60-4		F/D	RI
*	M/D=1188	A/C=C	COV=D	DCA
*	CIM=60-9		F/D	RI=R
*	M/D=1188	A/C=C	COV=D	DCA
*	CNTS	RVU= 7.10	A/V	
*	CIM=60-9		F/D	RI
*	M/D=1188	A/C=C	COV=D	DCA
*	CNTS	RVU= 8.79	A/V	
*	CIM=60-9		F/D	RI
*	M/D=1188	A/C=C	COV=D	DCA
*	CNTS	RVU= 14.30	A/V	
*	CIM=60-9		F/D	RI
*	M/D=1188	A/C=C	COV=D	DCA
*	CNTS	RVU= 38.60	A/V	
*	CIM=60-9		F/D	RI
*	M/D=1188	A/C=C	COV=D	DCA
*	CNTS	RVU= 9.20	A/V	
*	CIM=60-9		F/D	RI

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HCFA COMMON PROCEDURE CODING SYSTEM

E0555 HUMIDIFIER, DURABLE, GLASS OR AUTOCLAVABLE PLASTIC BOTTLE
TYPE, FOR USE WITH REGULATOR OR FLOWMETER

E0560 HUMIDIFIER, DURABLE FOR SUPPLEMENTAL HUMIDIFICATION DURING
IPP9 TREATMENT OR OXYGEN DELIVERY, E.G., CASCADE JR.

E0565 COMPRESSOR, AIR POWER SOURCE FOR EQUIPMENT WHICH IS NOT SELF-
CONTAINED OR CYLINDER DRIVEN

E0570 NEBULIZER, WITH COMPRESSOR E.G., DEVILBISS PULMO-AID

E0575 NEBULIZER, SELF-CONTAINED, ULTRASONIC

E0580 NEBULIZER, DURABLE, GLASS OR AUTOCLAVABLE PLASTIC, BOTTLE
TYPE, FOR USE WITH REGULATOR OR FLOWMETER

E0585 NEBULIZER, WITH COMPRESSOR AND HEATER

SUCTION PUMP/ROOM VAPORIZERS

E0600 SUCTION PUMP, HOME MODEL, PORTABLE

E0601 NASAL CONTINUOUS AIRWAY PRESSURE (CPAP) DEVICE

E0605 VAPORIZER, ROOM TYPE

E0606 POSTURAL DRAINAGE BOARD
MONITORING EQUIPMENT

M/D=1188 A/C=C COV=D DCA
CNTS RVU= .77 A/V
CIM=60-9 F/D RI
NCM 4107.9

M/D=1188 A/C=C COV=D DCA
XR4 XR5 IC=R SLHA
CNTS RVU= 2.54 A/V
CIM=60-9 F/D RI

M/D=1181 A/C COV DCA
XR4 XR5 IC=R SLHA
CNTS RVU= 2.79 A/V

M/D=1188 A/C=C COV=D DCA
CNTS RVU= 2.21 A/V
CIM=60-9 F/D RI

M/D=1188 A/C=C COV=D DCA
XR4 XR5 IC=R SLHA
CNTS RVU= 18.90 A/V
CIM=60-9 F/D RI

M/D=1188 A/C=C COV=D DCA
CNTS RVU= 1.65 A/V
CIM=60-9 F/D RI
NCM 4107.9

M/D=1188 A/C=C COV=D DCA
CNTS RVU= 9.56 A/V
CIM=60-9 F/D RI

M/D=1188 A/C=C COV=D DCA
CNTS RVU= 5.51 A/V
CIM=60-9 F/D RI

M/D=1188 A/C=C COV=D DCA
CIM=60-17 F/D RI

M/D=1188 A/C=C COV=D DCA
CNTS RVU= 1.14 A/V
CIM=60-9 F/D RI

M/D=1188 A/C=C COV=D DCA
CIM=60-9 F/D RI

E0607 HOME BLOOD GLUCOSE MONITOR

M/D=1188 A/C=E COV=D DCA
 ILC=8 SP SA
 CIM=60-11 F/D RI

E0608 APNEA MONITOR

M/D=1189 A/C=F COV=D DCA
 CIM=60-17 F/D RI

E0609 BLOOD GLUCOSE MONITOR WITH SPECIAL FEATURES (EQ., VOICE SYNTHESIZERS AUTOMATIC TIMERS, ETC.)

M/D= 986 A/C=A COV=D DCA
 CIM=60-11 F/D RI

PACEMAKER MONITOR

M/D= 986 A/C=A DCA

E0610 PACEMAKER MONITOR, SELF-CONTAINED, (CHECKS BATTERY DEPLETION, INCLUDES AUDIBLE AND VISIBLE CHECK SYSTEMS)

M/D=1189 A/C=F COV=D DCA
 CNTS RVU= 5.51 A/V
 CIM=60-7 50-1 F/D RI

E0615 PACEMAKER MONITOR, SELF CONTAINED, CHECKS BATTERY DEPLETION AND OTHER PACEMAKER COMPONENTS, INCLUDES DIGITAL/VISIBLE CHECK SYSTEMS

M/D=1189 A/C=F COV=D DCA
 CNTS RVU= 22.10 A/V
 CIM=60-7 50-1 F/D RI

PATIENT LIFTS

E0620 SEAT LIFT CHAIR, MOTORIZED TO ASSIST PATIENT IN STANDING AND SITTING

M/D=1188 A/C=E COV=D DCA
 CNTS RVU= 22.70 A/V
 CIM=60-8 F/D RI

E0621 SLING OR SEAT, PATIENT LIFT, CANVAS OR NYLON

M/D=1188 A/C=C COV=D DCA
 CIM=60-9 F/D RI

E0625 PATIENT LIFT, KARTOP, BATHROOM OR TOILET

M/D=1188 A/C=E COV=M DCA
 CNTS RVU= BR A/V
 CIM=60-9 F/D RI

E0630 PATIENT LIFT, HYDRAULIC, WITH SEAT OR SLING

M/D=1188 A/C=C COV=D DCA
 CNTS RVU= 18.40 A/V
 CIM=60-9 F/D RI

E0635 PATIENT LIFT, ELECTRIC WITH SEAT OR SLING

M/D=1188 A/C=C COV=D DCA
 CNTS RVU= 18.40 A/V
 CIM=60-9 F/D RI

PNEUMATIC COMPRESSOR AND APPLIANCES (LYMPHEDEMA PUMP)

M/D=1188 A/C=E DCA

E0650 PNEUMATIC COMPRESSOR, NON-SEGMENTAL HOME MODEL, (LYMPHEDEMA PUMP)

M/D=1188 A/C=E COV=D DCA
 CNTS RVU= 15.10 A/V
 CIM=60-16 F/D RI

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HCFA COMMON PROCEDURE CODING SYSTEM

E0651 PNEUMATIC COMPRESSOR, SEGMENTAL HOME MODEL (LYMPHEDEMA PUMP) WITHOUT CALIBRATED GRADIENT PRESSURE

E0652 PNEUMATIC COMPRESSOR, SEGMENTAL HOME MODEL (LYMPHEDEMA PUMP) WITH CALIBRATED GRADIENT PRESSURE

E0655 PNEUMATIC APPLIANCE FOR USE WITH PNEUMATIC COMPRESSOR, HALF ARM

E0660 PNEUMATIC APPLIANCE FOR USE WITH PNEUMATIC COMPRESSOR, FULL LEG

E0665 PNEUMATIC APPLIANCE FOR USE WITH PNEUMATIC COMPRESSOR, FULL ARM

E0666 PNEUMATIC APPLIANCE FOR USE WITH PNEUMATIC COMPRESSOR, HALF LEG

E0667 PNEUMATIC APPLIANCE FOR USE WITH SEGMENTAL PNEUMATIC COMPRESSOR, LEG

E0668 PNEUMATIC APPLIANCE FOR USE WITH SEGMENTAL PNEUMATIC COMPRESSOR, ARM

E0674 IRON LUNG

ULTRAVIOLET CABINET

E0690 ULTRAVIOLET CABINET, APPROPRIATE FOR HOME USE

SAFETY EQUIPMENT

E0700 SAFETY EQUIPMENT (E.G., BELT, HARNESS OR VEST)

RESTRAINTS

M/D=1188 A/C=C COV=D DCA
CIM=60-16 F/D RI

M/D=1188 A/C=C COV=D DCA
CIM=60-16 F/D RI

M/D=1188 A/C=C COV=D DCA
CNTS RVU= 2.21 A/V
CIM=60-16 F/D RI

M/D=1188 A/C=C COV=D DCA
CNTS RVU= 8R A/V
CIM=60-16 F/D RI

M/D=1188 A/C=C COV=D DCA
CNTS RVU= 2.57 A/V
CIM=60-16 F/D RI

M/D=1188 A/C=C COV=D DCA
CIM=60-16 F/D RI

M/D=1188 A/C=C COV=D DCA
CIM=60-16 F/D RI

M/D=1188 A/C=C COV=D DCA
CIM=60-16 F/D RI

M/D=1189 A/C=D COV=D DCA
XR1=E0461 XR2 XR3
XR4 XR5 IC=R SLHA
CNTS RVU= 8R A/V
CIM=60-9 F/D RI

M/D=1188 A/C=E COV=D DCA
CNTS RVU= 8R A/V
CIM=60-9 F/D RI

M/D=1188 A/C=C COV DCA
CNTS RVU= 8R A/V

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E0710 RESTRAINTS, ANY TYPE (BODY, CHEST, WRIST OR ANKLE)

HCFA COMMON PROCEDURE CODING SYSTEM

*

M/D=1188 A/C=C COV DCA

*

CNTS RVU= BR A/V

*

TRANSCUTANEOUS AND/OR NEUROMUSCULAR ELECTRICAL NERVE STIMULATORS
TENS

E0720 TENS, TWO LEAD, LOCALIZED STIMULATION

E0730 TENS, FOUR LEAD, LARGER AREA/MULTIPLE NERVE STIMULATION

E0731 FORM FITTING CONDUCTIVE GARMENT FOR DELIVERY OF TENS

E0740 REPLACEMENT BATTERIES FOR MEDICALLY NECESSARY TENS OWNED BY THE PATIENT

E0744 NEUROMUSCULAR STIMULATOR FOR SCOLIOSIS

E0745 NEUROMUSCULAR STIMULATOR, ELECTRONIC SHOCK UNIT

E0746 ELECTROMYOGRAPHY (EMG), BIOFEEDBACK DEVICE

E0747 OSTEOGENESIS STIMULATOR (NON-INVASIVE)

E0749 OSTEOGENESIS STIMULATOR (SURGICALLY IMPLANTED)

E0755 ELECTRONIC SALIVARY REFLEX STIMULATOR (INTRA-ORAL/NON-INVASIVE)

E0776 IV POLE

E0777 ENTERAL PUMP WITHOUT ALARM

E0778 ENTERAL PUMP WITH AN ALARM

E0779 PARENTERAL INFUSION PUMP, PORTABLE

M/D=1189 A/C=F COV=D DCA
CNTS RVU= 16.40 A/V
CIM=35-20 35-46 F/D RI

M/D=1189 A/C=F COV=D DCA
XR4 XR5 IC=R SLHA
CNTS RVU= 17.10 A/V
CIM=35-20 35-46 F/D RI

M/D=1188 A/C=A COV=D DCA
CIM=45-25 F/D RI

M/D=1188 A/C=C COV=D DCA
CNTS RVU= RNE A/V
CIM=65-8 F/D RI

M/D=1189 A/C=F COV DCA

M/D=1188 A/C=E COV=D DCA
CNTS RVU= BR A/V
CIM=35-77 F/D RI

M/D=1188 A/C=A COV=D DCA
CIM=35-27 F/D RI

M/D=1188 A/C=E COV=D DCA
CIM=35-48 F/D RI

M/D=1188 A/C=E COV=D DCA
CNTS RVU= BR A/V
CIM=35-48 F/D RI

M/D=1189 A/C=A COV=D DCA=90
MCM 2100.2 4105.2

M/D=1184 A/C COV DCA

M/D=1187 A/C=D COV DCA
XR1=B9000 XR2 XR3

M/D=1187 A/C=D COV DCA
XR1=B9002 XR2 XR3

M/D=1187 A/C=D COV DCA
XR1=B9004 XR2 XR3

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HCFA COMMON PROCEDURE CODING SYSTEM

E0780 PARENTERAL INFUSION PUMP, STATIONARY

E0781 AMBULATORY INFUSION PUMP WITH ADMINISTRATIVE EQUIPMENT, WORN BY PATIENT

E0782 INFUSION PUMP, IMPLANTABLE

E0790 PARENTERAL INFUSION PUMP, PORTABLE

E0791 PARENTERAL INFUSION PUMP, STATIONARY

TRACTION EQUIPMENT

TRACTION - CERVICAL

E0840 TRACTION FRAME, ATTACHED TO HEADBOARD, SIMPLE CERVICAL TRACTION

E0850 TRACTION STAND, FREE STANDING, SIMPLE CERVICAL TRACTION

TRACTION - OVERDOOR

E0860 TRACTION EQUIPMENT, OVERDOOR, CERVICAL

TRACTION - EXTREMITY

E0870 TRACTION FRAME, ATTACHED TO FOOTBOARD, SIMPLE EXTREMITY TRACTION, (E.G. BUCK'S)

E0880 TRACTION STAND, FREE STANDING, SIMPLE EXTREMITY TRACTION, (E.G., BUCK'S)

TRACTION - PELVIC

E0890 TRACTION FRAME, ATTACHED TO FOOTBOARD, SIMPLE PELVIC TRACTION

E0900 TRACTION STAND, FREE STANDING, SIMPLE PELVIC TRACTION, (E.G., BUCK'S)

TRAPEZE EQUIPMENT, FRACTURE FRAME AND OTHER ORTHOPEDIC DEVICES

M/D=1187 A/C=D COV DCA
XR1=89006 XR2 XR3

M/D=1189 A/C=C COV=D DCA
CIM=60-14 F/D RI
M/D=1188 A/C=C COV=D DCA
CIM=60-14 F/D RI

M/D=1189 A/C=D COV DCA
XR1=E0791 XR2 XR3

M/D=1188 A/C=A COV DCA

M/D=1189 A/C=F COV=D DCA
CNTS RVU= 2.76 A/V
CIM=60-9 F/D RI

M/D=1189 A/C=F COV=D DCA
CNTS RVU= 2.39 A/V
CIM=60-9 F/D RI

M/D=1188 A/C=C COV=D DCA
CNTS RVU= .92 A/V
CIM=60-9 F/D RI

M/D=1188 A/C=C COV=D DCA
CNTS RVU= 2.39 A/V
CIM=60-9 F/D RI

M/D=1188 A/C=C COV=D DCA
CNTS RVU= 2.02 A/V
CIM=60-9 F/D RI

M/D=1188 A/C=C COV=D DCA
CNTS RVU= 3.13 A/V
CIM=60-9 F/D RI

M/D=1188 A/C=C COV=D DCA
CNTS RVU= 2.76 A/V
CIM=60-9 F/D RI
M/D= 986 A/C=E DCA

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HCFA COMMON PROCEDURE CODING SYSTEM

E0910 TRAPEZE BARS, A/K/A PATIENT HELPER, ATTACHED TO BED, WITH GRAB BAR

M/D= 986 A/C=E COV=D DCA
 CNTS RVU= 3.68 A/V
 CIM=60-9 F/D RI

E0920 FRACTURE FRAME, ATTACHED TO BED, INCLUDES WEIGHTS

M/D=1188 A/C=C COV=D DCA
 CNTS RVU= 13.60 A/V
 CIM=60-9 F/D RI

E0930 FRACTURE FRAME, FREE STANDING, INCLUDES WEIGHTS

M/D=1188 A/C=C COV=D DCA
 CNTS RVU= 20.40 A/V
 CIM=60-9 F/D RI

E0935 PASSIVE MOTION EXERCISE DEVICE

M/D=1188 A/C=E COV=D DCA
 CIM=60-9 F/D RI

E0940 TRAPEZE BAR, FREE STANDING, COMPLETE WITH GRAB BAR

M/D=1188 A/C=C COV=D DCA
 CNTS RVU= 6.43 A/V
 CIM=60-9 F/D RI

E0941 GRAVITY ASSISTED TRACTION DEVICE, ANY TYPE

M/D=1188 A/C=C COV=D DCA
 CIM=60-9 F/D RI

E0942 CERVICAL HEAD HARNESS/HALTER

M/D=1185 A/C=C COV DCA

E0943 CERVICAL PILLOW

M/D=1188 A/C=C COV DCA

E0944 PELVIC BELT/HARNESS/BOOT

M/D=1184 A/C COV DCA

E0945 EXTREMITY BELT/HARNESS

M/D=1184 A/C COV DCA

E0946 FRACTURE, FRAME, DUAL WITH CROSS BARS, ATTACHED TO BED, (E.G. BALKEN, 4 POSTER)

M/D=1188 A/C=C COV=D DCA
 CIM=60-9 F/D RI

E0947 FRACTURE FRAME, ATTACHMENTS FOR COMPLEX PELVIC TRACTION

M/D=1188 A/C=C COV=D DCA
 CIM=60-9 F/D RI

E0948 FRACTURE FRAME, ATTACHMENTS FOR COMPLEX CERVICAL TRACTION

M/D=1188 A/C=C COV=D DCA
 CIM=60-9 F/D RI

WHEELCHAIRS E0950 - E1299

E0950 TRAY

M/D=1188 A/C=C COV DCA

E0951 LOOP HEEL, EACH

M/D=1188 A/C=C COV DCA

E0952 LOOP TOE, EACH

M/D=1188 A/C=C COV DCA

E0953 PNEUMATIC TIRE, EACH

M/D=1188 A/C=C COV=D DCA
 CIM=60-9 F/D RI

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HCFA COMMON PROCEDURE CODING SYSTEM

E0954	SEMI-PNEUMATIC CASTER, EACH WHEELCHAIR ACCESSORIES	M/D=1188 CIM=60-9	A/C=C F/D	COV=D RI	DCA RI
E0958	WHEELCHAIR ATTACHMENT TO CONVERT ANY WHEELCHAIR TO ONE ARM DRIVE	M/D=1188 CIM=60-9	A/C=C F/D	COV=D RI	DCA RI
E0959	AMPUTEE ADAPTER (DEVICE USED TO COMPENSATE FOR TRANSFER OF WEIGHT DUE TO LOST LIMBS TO MAINTAIN PROPER BALANCE)	M/D=1188 CIM=60-9	A/C=C F/D	COV=D RI	DCA RI
E0961	BRAKE EXTENSION, FOR WHEELCHAIR	M/D=1188 CIM=60-9	A/C=C F/D	COV=D RI	DCA RI
E0962	1" CUSHION, FOR WHEELCHAIR	M/D=1188 CIM=60-9	A/C=C F/D	COV=D RI	DCA RI
E0963	2" CUSHION, FOR WHEELCHAIR	M/D=1188 CIM=60-9	A/C=C F/D	COV=D RI	DCA RI
E0964	3" CUSHION, FOR WHEELCHAIR	M/D=1188 CIM=60-9	A/C=C F/D	COV=D RI	DCA RI
E0965	4" CUSHION, FOR WHEELCHAIR	M/D=1188 CIM=60-9	A/C=C F/D	COV=D RI	DCA RI
E0966	HOOK ON HEAD REST EXTENSION	M/D=1188 CIM=60-9	A/C=C F/D	COV=D RI	DCA RI
E0967	WHEELCHAIR HAND RIMS WITH 8 VERTICAL RUBBER TIPPED PROJECTIONS, PAIR	M/D=1188 CIM=60-9	A/C=C F/D	COV=D RI	DCA RI
E0968	COMMUNE SEAT, WHEELCHAIR	M/D=1188 CIM=60-9	A/C=C F/D	COV=D RI	DCA RI
E0969	NARROWING DEVICE, WHEELCHAIR	M/D=1188 CIM=60-9	A/C=C F/D	COV=D RI	DCA RI
E0970	NO.2 FOOTPLATES, EXCEPT FOR ELEVATING LEG REST	M/D=1188 CIM=60-9	A/C=C F/D	COV=D RI	DCA RI
E0971	ANTI-TIPPING DEVICE WHEELCHAIRS	M/D=1188 CIM=60-9	A/C=E F/D	COV=D RI	DCA RI
E0972	TRANSFER BOARD, WHEELCHAIR	M/D=1188 CIM=60-9	A/C=C F/D	COV=D RI	DCA RI
E0973	ADJUSTABLE HEIGHT DETACHABLE ARMS, DESK OR FULL LENGTH, WHEELCHAIR	M/D=1188 CIM=60-9	A/C=C F/D	COV=D RI	DCA RI

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HCFA COMMON PROCEDURE CODING SYSTEM

E0974 "GRADE-AID" (DEVICE TO PREVENT ROLLING BACK ON AN INCLINE)
FOR WHEELCHAIR

E0975 REINFORCED SEAT UPHOLSTERY, WHEELCHAIR

E0976 REINFORCED BACK UPHOLSTERY, WHEELCHAIR

E0977 WEDGE CUSHION, WHEELCHAIR

E0978 BELT, SAFETY WITH AIRPLANE BUCKLE, WHEELCHAIR

E0979 BELT, SAFETY WITH VELCRO CLOSURE, WHEELCHAIR

E0980 SAFETY VEST, WHEELCHAIR

E0990 ELEVATING LEG REST, EACH

E0991 UPHOLSTERY SEAT

E0992 SOLID SEAT INSERT

E0993 BACK, UPHOLSTERY

E0994 ARM REST, EACH

E0995 CALF REST, EACH

E0996 TIRE, SOLID, EACH

E0997 CASTER WITH A FORK

E0998 CASTER WITHOUT FORK

E0999 PNEUMATIC TIRE WITH WHEEL

E1000 TIRE, PNEUMATIC CASTER

M/D=1188 A/C=C COV DCA

M/D=1188 A/C=C COV=D DCA
CIM=60-9 F/D RIM/D=1188 A/C=C COV=D DCA
CIM=60-9 F/D RI

M/D=1188 A/C=C COV DCA

M/D=1188 A/C=C COV DCA
CIM=60-9 F/D RI

M/D=1188 A/C=C COV DCA

M/D=1188 A/C=C COV DCA

M/D=1188 A/C=C COV=D DCA
CIM=60-9 F/D RIM/D=1188 A/C=C COV=D DCA
CIM=60-9 F/D RIM/D=1188 A/C=C COV=D DCA
CIM=60-9 F/D RIM/D=1188 A/C=C COV=D DCA
CIM=60-9 F/D RIM/D=1188 A/C=C COV=D DCA
CIM=60-9 F/D RIM/D=1188 A/C=C COV=D DCA
CIM=60-9 F/D RIM/D=1188 A/C=C COV=D DCA
CIM=60-9 F/D RIM/D=1188 A/C=C COV=D DCA
CIM=60-9 F/D RIM/D=1188 A/C=C COV=D DCA
CIM=60-9 F/D RIM/D=1188 A/C=C COV=D DCA
CIM=60-9 F/D RIM/D=1188 A/C=C COV=D DCA
CRTS RVU= BR A/V
CIM=60-9 F/D RI

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HCFA COMMON PROCEDURE CODING SYSTEM

E1001 WHEEL, SINGLE

E1005 REPLACEMENT, BATTERIES FOR MEDICALLY NECESSARY ELECTRIC
WHEELCHAIR OWNED BY THE PATIENT
ROLLABOUT CHAIR

E1030 ROLLABOUT CHAIR, WITHOUT ARMS

E1031 ROLLABOUT CHAIR, ANY AND ALL TYPES WITH CASTORS 5" OR GREATER

E1035 GERIATRIC CHAIR

E1036 POSITIONING CHAIR (SUBMIT BRAND NAME, MODEL NUMBER AND
SPECIFICATIONS)

E1040 ROLLABOUT CHAIR, WITH FIXED OR REMOVABLE ARMS

WHEELCHAIR - FULLY-RECLINING

E1050 FULLY-RECLINING WHEELCHAIR, FIXED FULL LENGTH ARMS, SWING AWAY
DETACHABLE ELEVATING LEG RESTSE1060 FULLY-RECLINING WHEELCHAIR, DETACHABLE ARMS, DESK OR FULL
LENGTH, SWING AWAY DETACHABLE ELEVATING LEGRESTSE1065 POWER ATTACHMENT (TO CONVERT ANY WHEELCHAIR TO MOTORIZED
WHEELCHAIR, E.G., SOLD)

E1066 BATTERY CHARGER

E1067 PROPORTIONAL CONTROL DEVICE (MAY BE ADDED TO WHEELCHAIRS WITH
MICRO-SWITCH CONTROL FOR MORE ACTIVE PATIENT AND ALLOWS
VARIABLE SPEEDS)

E1069 DEEP CYCLE BATTERY

M/D=1188 A/C=C COV=D DCA
CIM=60-9 F/D RI

M/D=1188 A/C=C COV=D DCA
CIM=60-9 F/D RI

M/D=1189 A/C=D COV=D DCA
XR1=E1031 XR2 XR3
CNTS RVU= 4.74 A/V
CIM=60-9 F/D RI

M/D=1189 A/C=A COV=D DCA=90
CIM=60-9 F/D RI

M/D=1189 A/C=D COV=D DCA
XR1=E1031 XR2 XR3
CIM=60-9 F/D RI

M/D=1189 A/C=D COV=D DCA
XR1=E1031 XR2 XR3
CIM=60-9 F/D RI

M/D=1189 A/C=D COV=D DCA
XR1=E1031 XR2 XR3
CNTS RVU= 6.40 A/V
CIM=60-9 F/D RI
M/D= 986 A/C=E DCA

M/D= 986 A/C=E COV=D DCA
CNTS RVU= 16.40 A/V
CIM=60-9 F/D RI

M/D=1188 A/C=C COV=D DCA
CNTS RVU= 20.10 A/V
CIM=60-9 F/D RI

M/D=1188 A/C=E COV=D DCA
CIM=60-9 F/D RI

M/D=1188 A/C=C COV=D DCA
CIM=60-9 F/D RI

M/D=1188 A/C=D COV DCA

M/D=1188 A/C=C COV=D DCA
CIM=60-9 F/D RI

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HCFA COMMON PROCEDURE CODING SYSTEM

E1070 FULLY-RECLINING WHEELCHAIR, DETACHABLE ARMS (DESK OR FULL LENGTH) SWING AWAY DETACHABLE FOOTREST

E1080 MOTORIZED WHEELCHAIR, WITH MICRO-SWITCH CONTROL, DETACHABLE ARMS DESK OR FULL LENGTH SWING AWAY, DETACHABLE ELEVATING LEG REST

E1081 MOTORIZED WHEELCHAIR, WITH MICRO-SWITCH CONTROL, FIXED FULL LENGTH ARMS, SWING AWAY DETACHABLE FOOT RESTS

E1082 MOTORIZED WHEELCHAIR, WITH MICRO-SWITCH CONTROL, DETACHABLE ARMS DESK OR FULL LENGTH, SWING AWAY DETACHABLE FOOT RESTS

E1083 HEMI-WHEELCHAIR, FIXED FULL LENGTH ARMS, SWING AWAY DETACHABLE ELEVATING LEG REST

E1084 HEMI-WHEELCHAIR, DETACHABLE ARMS DESK OR FULL LENGTH ARMS, SWING AWAY DETACHABLE ELEVATING LEG RESTS

E1085 HEMI-WHEELCHAIR, FIXED FULL LENGTH ARMS, SWING AWAY DETACHABLE FOOT RESTS

E1086 HEMI-WHEELCHAIR DETACHABLE ARMS DESK OR FULL LENGTH, SWING AWAY DETACHABLE FOOTRESTS

E1087 HIGH STRENGTH LIGHTWEIGHT WHEELCHAIR, FIXED FULL LENGTH ARMS, SWING AWAY DETACHABLE ELEVATING LEG RESTS

E1088 HIGH STRENGTH LIGHTWEIGHT WHEELCHAIR, DETACHABLE ARMS DESK OR FULL LENGTH, SWING AWAY DETACHABLE ELEVATING LEG RESTS

E1089 HIGH STRENGTH LIGHTWEIGHT WHEELCHAIR, FIXED LENGTH ARMS, SWING AWAY DETACHABLE FOOTREST

E1090 HIGH STRENGTH LIGHTWEIGHT WHEELCHAIR, DETACHABLE ARMS DESK OR FULL LENGTH, SWING AWAY DETACHABLE FOOT RESTS

E1091 YOUTH WHEELCHAIR, ANY TYPE

E1092 WIDE HEAVY DUTY WHEEL CHAIR, DETACHABLE ARMS DESK OF FULL LENGTH, SWING AWAY DETACHABLE ELEVATING LEG RESTS

E1093 WIDE HEAVY DUTY WHEELCHAIR, DETACHABLE ARMS DESK OR FULL LENGTH ARMS, SWING AWAY DETACHABLE FOOTRESTS

WHEELCHAIR - SEMI-RECLINING

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* M/D=1188 A/C=C COV=D DCA
* CNTS RVU= 18.20 A/V
* CIM=60-9 F/D RI
*
* M/D=1187 A/C=D COV DCA
* XR1=E1211 XR2 XR3
* CNTS RVU= 14.50 A/V
*
* M/D=1187 A/C=D COV DCA
* XR1=E1212 XR2 XR3
*
* M/D=1187 A/C=D COV DCA
* XR1=E1213 XR2 XR3
*
* M/D=1188 A/C=C COV=D DCA
* CIM=60-9 F/D RI
*
* M/D=1188 A/C=C COV=D DCA
* CIM=60-9 F/D RI
*
* M/D=1188 A/C=C COV=D DCA
* CIM=60-9 F/D RI
*
* M/D=1188 A/C=C COV=D DCA
* CIM=60-9 F/D RI
*
* M/D=1188 A/C=C COV=D DCA
* CIM=60-9 F/D RI
*
* M/D=1188 A/C=C COV=D DCA
* CIM=60-9 F/D RI
*
* M/D=1188 A/C=C COV=D DCA
* CNTS RVU= 13.20 A/V
* CIM=60-9 F/D RI
*
* M/D=1188 A/C=C COV=D DCA
* CIM=60-9 F/D RI
*
* M/D=1188 A/C=C COV=D DCA
* CIM=60-9 F/D RI
*
* M/D=1188 A/C=C COV=D DCA
* CIM=60-9 F/D RI
*
* M/D=1187 A/C=A DCA

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E1100 SEMI-RECLINING WHEELCHAIR, FIXED FULL LENGTH ARMS, SWING AWAY DETACHABLE ELEVATING LEG RESTS

M/D=1187 A/C=A COV=D DCA
CNTS RVU= 15.10 A/V
CIM=60-9 F/D RI

E1110 SEMI-RECLINING WHEELCHAIR, DETACHABLE ARMS (DESK OR FULL LENGTH) ELEVATING LEG REST

M/D=1188 A/C=C COV=D DCA
CNTS RVU= 18.75 A/V
CIM=60-9 F/D RI

WHEELCHAIR - STANDARD

E1130 STANDARD WHEELCHAIR, FIXED FULL LENGTH ARMS, FIXED OR SWING AWAY DETACHABLE FOOTRESTS

M/D=1188 A/C=C COV=D DCA
CNTS RVU= 8.45 A/V
CIM=60-9 F/D RI

E1140 WHEELCHAIR, DETACHABLE ARMS, DESK OR FULL LENGTH, SWING AWAY DETACHABLE FOOTRESTS

M/D=1188 A/C=C COV=D DCA
CNTS RVU= 12.30 A/V
CIM=60-9 F/D RI

E1150 WHEELCHAIR, DETACHABLE ARMS, DESK OR FULL LENGTH SWING AWAY DETACHABLE ELEVATING LEGRESTS

M/D=1188 A/C=C COV=D DCA
CNTS RVU= 14.20 A/V
CIM=60-9 F/D RI

E1160 WHEELCHAIR, FIXED FULL LENGTH ARMS, SWING AWAY DETACHABLE ELEVATING LEGRESTS

M/D=1188 A/C=C COV=D DCA
CNTS RVU= 10.67 A/V
CIM=60-9 F/D RI

WHEELCHAIR - AMPUTEE

E1170 AMPUTEE WHEELCHAIR, FIXED FULL LENGTH ARMS, SWING AWAY DETACHABLE ELEVATING LEGRESTS

M/D=1188 A/C=C COV=D DCA
CNTS RVU= 11.60 A/V
CIM=60-9 F/D RI

E1171 AMPUTEE WHEELCHAIR, FIXED FULL LENGTH ARMS, WITHOUT FOOTRESTS OR LEGREST

M/D=1188 A/C=C COV=D DCA
CIM=60-9 F/D RI

E1172 AMPUTEE WHEELCHAIR, DETACHABLE ARMS (DESK OR FULL LENGTH) WITHOUT FOOTRESTS OR LEGREST

M/D=1188 A/C=C COV=D DCA
CIM=60-9 F/D RI

E1180 AMPUTEE WHEELCHAIR, DETACHABLE ARMS (DESK OR FULL LENGTH) SWING AWAY DETACHABLE FOOTRESTS

M/D=1188 A/C=C COV=D DCA
CNTS RVU= 13.80 A/V
CIM=60-9 F/D RI

E1190 AMPUTEE WHEELCHAIR, DETACHABLE ARMS (DESK OR FULL LENGTH) SWING AWAY DETACHABLE ELEVATING LEGRESTS

M/D=1188 A/C=C COV=D DCA
CNTS RVU= 15.73 A/V
CIM=60-9 F/D RI

E1195 HEAVY DUTY WHEELCHAIR, FIXED FULL LENGTH ARMS, SWING AWAY DETACHABLE ELEVATING LEGRESTS

M/D=1188 A/C=C COV=D DCA
CIM=60-9 F/D RI

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HCFA COMMON PROCEDURE CODING SYSTEM

E1200 AMPUTEE WHEELCHAIR, FIXED FULL LENGTH ARMS, SWING AWAY
DETACHABLE FOOTREST

WHEELCHAIR-POWER

E1210 MOTORIZED WHEELCHAIR, FIXED FULL LENGTH ARMS, SWING AWAY
DETACHABLE ELEVATING LEG RESTS

E1211 MOTORIZED WHEELCHAIR, DETACHABLE ARMS DESK OR FULL LENGTH SWING AWAY,
DETACHABLE ELEVATING LEG REST

E1212 MOTORIZED WHEELCHAIR, FIXED FULL LENGTH ARMS, SWING AWAY DETACHABLE
FOOT RESTS

E1213 MOTORIZED WHEELCHAIR, DETACHABLE ARMS DESK OR FULL LENGTH, SWING AWAY
DETACHABLE FOOT RESTS

WHEELCHAIR - SPECIAL SIZE

E1220 WHEELCHAIR; SPECIALLY SIZED OR CONSTRUCTED, (INDICATE BRAND
NAME, MODEL NUMBER, IF ANY) AND JUSTIFICATION

E1221 WHEELCHAIR WITH FIXED ARM, FOOTRESTS

E1222 WHEELCHAIR WITH FIXED ARM, ELEVATING LEGRESTS

E1223 WHEELCHAIR WITH DETACHABLE ARMS, FOOTRESTS

E1224 WHEELCHAIR WITH DETACHABLE ARMS, ELEVATING LEGRESTS

E1225 SEMI-RECLINING BACK FOR CUSTOMIZED WHEEL CHAIR

E1226 FULL RECLINING BACK FOR CUSTOMIZED WHEELCHAIR

M/D=1189 A/C=C COV=D DCA
CNTS RVU= 10.22 A/V
CIM=60-9 F/D RI

M/D=1189 A/C=F COV=D DCA
CIM=60-5 60-9 F/D RI

M/D=1189 A/C=F COV=D DCA
CIM=60-5 60-9 F/D RI

M/D=1189 A/C=F COV=D DCA
CIM=60-5 60-9 F/D RI

M/D=1189 A/C=F COV=D DCA
CIM=60-5 60-9 F/D RI

M/D=1189 A/C=C COV=D DCA
XR4 XR5 IC=R SLHA
CNTS RVU= BR A/V
CIM=60-6 F/D RI

M/D=1189 A/C=D COV=D DCA
XR1=E1220 XR2 XR3
CIM=60-9 F/D RI

M/D=1189 A/C=D COV=D DCA
XR1=E1220 XR2 XR3
CIM=60-9 F/D RI

M/D=1189 A/C=D COV=D DCA
XR1=E1220 XR2 XR3
CIM=60-9 F/D RI

M/D=1189 A/C=D COV=D DCA
XR1=E1220 XR2 XR3
CIM=60-9 F/D RI

M/D=1189 A/C=D COV=D DCA
XR1=E1220 XR2 XR3
CIM=60-9 F/D RI

M/D=1189 A/C=D COV=D DCA
XR1=E1220 XR2 XR3
CIM=60-9 F/D RI

E1227 SPECIAL HEIGHT ARMS FOR WHEELCHAIR

M/D=1189 A/C=D CDV=D DCA
 XR1=E1220 XR2 XR3
 CIN=60-6 F/D RI

E1228 SPECIAL BACK HEIGHT FOR WHEELCHAIR

M/D=1189 A/C=D CDV=D DCA
 XR1=E1220 XR2 XR3
 CIN=60-6 F/D RI

POWER OPERATED VEHICLE

E1230 POWER OPERATED VEHICLE (3 WHEEL NON-HIGHWAY) INDICATE BRAND NAME AND MODEL NUMBER

M/D=1188 A/C=E CDV=D DCA
 XR4 XR5 IC=R SLHA
 CNTS RVU= BR A/V
 CIN=60-5 F/D RI

WHEELCHAIR - LIGHTWEIGHT

E1240 LIGHTWEIGHT WHEELCHAIR, DETACHABLE ARMS, (DESK OR FULL LENGTH) SWING AWAY DETACHABLE, ELEVATING LEGREST

M/D=1188 A/C=C CDV=D DCA
 CNTS RVU= BR A/V
 CIN=60-9 F/D RI

E1250 LIGHTWEIGHT WHEELCHAIR, FIXED FULL LENGTH ARMS, SWING AWAY DETACHABLE FOOTREST

M/D=1188 A/C=C CDV=D DCA
 CNTS RVU= BR A/V
 CIN=60-9 F/D RI

E1260 LIGHTWEIGHT WHEELCHAIR, DETACHABLE ARMS (DESK OR FULL LENGTH) SWING AWAY DETACHABLE FOOTREST

M/D=1188 A/C=C CDV=D DCA
 CNTS RVU= BR A/V
 CIN=60-9 F/D RI

E1270 LIGHTWEIGHT WHEELCHAIR, FIXED FULL LENGTH ARMS, SWING AWAY DETACHABLE ELEVATING LEGRESTS

M/D=1188 A/C=C CDV=D DCA
 CNTS RVU= BR A/V
 CIN=60-9 F/D RI

WHEELCHAIR - HEAVY DUTY

E1280 HEAVY DUTY WHEELCHAIR, DETACHABLE ARMS (DESK OR FULL LENGTH) ELEVATING LEGRESTS

M/D=1188 A/C=C CDV=D DCA
 CNTS RVU= BR A/V
 CIN=60-9 F/D RI

E1285 HEAVY DUTY WHEELCHAIR, FIXED FULL LENGTH ARMS, SWING AWAY DETACHABLE FOOTREST

M/D=1188 A/C=C CDV=D DCA
 CNTS RVU= BR A/V
 CIN=60-9 F/D RI

E1290 HEAVY DUTY WHEELCHAIR, DETACHABLE ARMS (DESK OR FULL LENGTH) SWING AWAY DETACHABLE FOOTREST

M/D=1188 A/C=C CDV=D DCA
 CNTS RVU= BR A/V
 CIN=60-9 F/D RI

E1295 HEAVY DUTY WHEELCHAIR, FIXED FULL LENGTH ARMS, ELEVATING LEGREST

M/D=1188 A/C=C CDV=D DCA
 CNTS RVU= BR A/V
 CIN=60-9 F/D RI

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HCFA COMMON PROCEDURE CODING SYSTEM

E1296 SPECIAL WHEELCHAIR SEAT HEIGHT FROM FLOOR

E1297 SPECIAL WHEELCHAIR SEAT DEPTH, BY UPHOLSTERY

E1298 SPECIAL WHEELCHAIR SEAT DEPTH AND/OR WIDTH, BY CONSTRUCTION

E1299 SPECIAL WHEELCHAIR SEAT WIDTH, BY UPHOLSTERY
FOR CUSTOMIZED WHEELCHAIR

WHIRLPOOL EQUIPMENT

E1300 WHIRLPOOL, PORTABLE (OVERTUB TYPE)

E1310 WHIRLPOOL, NON-PORTABLE (BUILT-IN TYPE)

REPAIRS AND REPLACEMENT SUPPLIES

E1350 REPAIR OR NON-ROUTINE SERVICE (E.G., BREAKING DOWN SEALED
COMPONENTS) REQUIRING THE SKILL OF A TECHNICIAN

ADDITIONAL OXYGEN RELATED EQUIPMENT

E1351 CANNULA

E1352 TUBING, UNSPECIFIED LENGTH

E1353 REGULATOR

M/D=1188 A/C=E COV=D DCA
CIM=60-6 F/D RIM/D=1188 A/C=E COV=D DCA
CNTS RVU= BR A/V
CIM=60-6 F/D RIM/D=1188 A/C=E COV=D DCA
CIM=60-6 F/D RI

M/D=1187 A/C=D COV=D DCA

M/D=1189 A/C=F COV=M DCA
CNTS RVU= BR A/V
CIM=60-9 F/D RI
MCM 2210.3M/D=1189 A/C=F COV=D DCA
CNTS RVU= BR A/V
CIM=60-9 F/D RI
MCM 2210.3M/D=1189 A/C=F COV=D DCA
CNTS RVU= BR A/V
MCM 2100.4M/D=1189 A/C=D COV=D DCA
XR1=A4615 XR2 XR3
CIM=60-4 F/D RI
MCM 4107.9M/D=1189 A/C=D COV=D DCA
XR1=A4615 XR2 XR3
CIM=60-4 F/D RI
MCM 4107.9M/D=1188 A/C=C COV=D DCA
CIM=60-4 F/D RI
MCM 4107.9

E1854 MOUTH PIECE

```

* M/D=1189 A/C=D COV=D DCA
* XR1=A4617 XR2 XR3
* CIN=60-4 F/D RI
* MCM 4107.9

```

E1855 STAND/RACK

```

* M/D=1188 A/C=C COV=D DCA
* CIN=60-4 F/D RI

```

E1356 BREATHING CIRCUITS

```

* M/D=1189 A/C=D COV=D DCA
* XR1=A4618 XR2 XR3
* CIN=60-4 F/D RI
* MCM 4107.9

```

E1371 FACE TENT

```

* M/D=1189 A/C=D COV=D DCA
* XR1=A4619 XR2 XR3
* CIN=60-4 F/D RI
* MCM 4107.9

```

E1372 IMMERSION EXTERNAL HEATER FOR NEBULIZER

```

* M/D=1188 A/C=C COV=D DCA
* CIN=60-4 F/D RI

```

E1373 TRACHEOTOMY MASK OR COLLAR

```

* M/D=1189 A/C=D COV=D DCA
* XR1=A4621 XR2 XR3
* CIN=60-4 F/D RI

```

E1374 VARIABLE CONCENTRATION MASK

```

* M/D=1189 A/C=D COV=D DCA
* XR1=A4620 XR2 XR3
* CIN=60-4 F/D RI
* MCM 4107.9

```

E1375 NEBULIZER PORTABLE WITH SMALL COMPRESSOR, WITH LIMITED FLOW

```

* M/D=1188 A/C=C COV=D DCA
* CIN=60-4 F/D RI

```

E1377 OXYGEN CONCENTRATOR, HIGH HUMIDITY SYSTEM EQUIV. TO 244 CU. FT.

```

* M/D=1189 A/C=F COV=D DCA
* XR1=Q0036 XR2 XR3
* CIN=60-4 F/D RI
* MCM 4107.9

```

E1378 OXYGEN CONCENTRATOR, HIGH HUMIDITY SYSTEM EQUIV. TO 488 CU. FT.

```

* M/D=1189 A/C=F COV=D DCA
* XR1=Q0036 XR2 XR3
* CIN=60-4 F/D RI
* MCM 4107.9

```

E1379 OXYGEN CONCENTRATOR, HIGH HUMIDITY SYSTEM EQUIV. TO 732 CU. FT.

```

* M/D=1189 A/C=F COV=D DCA
* XR1=Q0036 XR2 XR3
* CIN=60-4 F/D RI
* MCM 4107.9

```

E1380 OXYGEN CONCENTRATOR, HIGH HUMIDITY SYSTEM EQUIV. TO 976 CU. FT.

```

* M/D=1189 A/C=F COV=D DCA
* XR1=Q0036 XR2 XR3
* CIN=60-4 F/D RI
* MCM 4107.9

```

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E1395 OXYGEN CONCENTRATOR, EQUIVALENT TO 1952 CUBIC FEET

HCFA COMMON PROCEDURE CODING SYSTEM

M/D=1188 A/C=C COV=D DCA
CIN=60-4 F/D RI

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HCFA COMMON PROCEDURE CODING SYSTEM

E1396 OXYGEN CONCENTRATOR, EQUIVALENT TO OVER 1952 CUBIC FEET

E1399 DURABLE MEDICAL EQUIPMENT, NOT OTHERWISE CLASSIFIED

E1400 OXYGEN CONCENTRATOR, MANUFACTURER SPECIFIED MAXIMUM FLOW RATE DOES NOT EXCEED 2 LITERS PER MINUTE, AT 85 PERCENT OR GREATER CONCENTRATION.

E1401 OXYGEN CONCENTRATOR, MANUFACTURER SPECIFIED MAXIMUM FLOW RATE GREATER THAN 2 LITERS PER MINUTE, DOES NOT EXCEED 3 LITERS PER MINUTE, AT 85 PERCENT OR GREATER CONCENTRATION

E1402 OXYGEN CONCENTRATOR, MANUFACTURER SPECIFIED MAXIMUM FLOW RATE GREATER THAN 3 LITERS PER MINUTE, DOES NOT EXCEED 4 LITERS PER MINUTE, AT 85 PERCENT OR GREATER CONCENTRATION

E1403 OXYGEN CONCENTRATOR, MANUFACTURER SPECIFIED MAXIMUM FLOW RATE GREATER THAN 4 LITERS PER MINUTE, DOES NOT EXCEED 5 LITERS PER MINUTE, AT 85 PERCENT OR GREATER CONCENTRATION

E1404 OXYGEN CONCENTRATOR, MANUFACTURER SPECIFIED MAXIMUM FLOW RATE GREATER THAN 5 LITERS PER MINUTE, AT 85 PERCENT OR GREATER CONCENTRATION

E1405 OXYGEN AND WATER VAPOR ENRICHING SYSTEM WITH HEATED DELIVERY

E1406 OXYGEN AND WATER VAPOR ENRICHING SYSTEM WITHOUT HEATED DELIVERY

*	M/D=1188	A/C=C	COV=D	DCA
*	CIM=60-4		F/D	RI
*	M/D=1188	A/C=C	COV	DCA
*	CNTS		RVU= 8R	A/V
*	M/D=1188	A/C=C	COV=D	DCA
*	CIM=60-4		F/D	RI
*	MCM 4107.9			
*	M/D=1188	A/C=E	COV=D	DCA
*	CIM=60-4		F/D	RI
*	MCM 4107.9			
*	M/D=1188	A/C=C	COV=D	DCA
*	CIM=60-4		F/D	RI
*	MCM 4107.9			
*	M/D=1188	A/C=C	COV=D	DCA
*	CIM=60-4		F/D	RI
*	MCM 4107.9			
*	M/D=1188	A/C=C	COV=D	DCA
*	CIM=60-4		F/D	RI
*	M/D=1189	A/C=F	COV=D	DCA
*	CIM=60-4		F/D	RI
*	MCM 4107			
*	M/D=1189	A/C=F	COV=D	DCA
*	CIM=60-4		F/D	RI
*	MCM 4107			

ARTIFICIAL KIDNEY MACHINES AND ACCESSORIES

NOTE: FOR SUPPLIES FOR ESRD, SEE PROCEDURE CODES A4650-A4999.
FOR DIALYSIS PROCEDURES, SEE CODES M0900 - M0999

E1510 KIDNEY, DIALYSATE DELIVERY SYST. KIDNEY MACHINE, PUMP RECIRCULATING, AIR REMOVAL SYST. FLOWRATE METER, POWER OFF, HEATER AND TEMP CONTROL WITH ALARM, I.V. POLES, PRESSURE GAUGE, CONC. CONTAINER

E1520 HEPARIN INFUSION PUMP FOR DIALYSIS

E1530 AIR BUBBLE DETECTOR FOR DIALYSIS

E1540 PRESSURE ALARM FOR DIALYSIS

E1550 BATH CONDUCTIVITY METER FOR DIALYSIS

E1560 BLOOD LEAK DETECTOR FOR DIALYSIS

E1570 ADJUSTABLE CHAIR, FOR ESRD PATIENTS

E1575 TRANSDUCER PROTECTORS/FLUID BARRIERS, ANY SIZE, EACH

E1580 UNIPUNCTURE CONTROL SYSTEM FOR DIALYSIS

E1590 HEMODIALYSIS MACHINE

E1592 AUTOMATIC INTERMITTENT PERITONEAL DIALYSIS SYSTEM

E1594 CYCLER DIALYSIS MACHINE FOR PERITONEAL DIALYSIS

M/D= 986 A/C=E DCA

M/D=1188 A/C=C COV=D DCA
CHTS RVU=257.40 A/V
CIM=60-1 F/D RI

M/D=1188 A/C=C COV=D DCA
CHTS RVU= 11.03 A/V
CIM=60-1 F/D RI

M/D=1188 A/C=C COV=D DCA
CHTS RVU= 14.70 A/V
CIM=60-1 F/D RI

M/D=1188 A/C=C COV=D DCA
CHTS RVU= 7.85 A/V
CIM=60-1 F/D RI

M/D=1188 A/C=C COV=D DCA
CHTS RVU= BR A/V
CIM=60-1 F/D RI

M/D=1188 A/C=C COV=D DCA
CHTS RVU= 7.85 A/V
CIM=60-1 F/D RI

M/D=1188 A/C=C COV=D DCA
CHTS RVU= 14.70 A/V
CIM=60-1 F/D RI

M/D=1188 A/C=E COV=D DCA
CIM=60-1 F/D RI

M/D=1188 A/C=C COV=D DCA
CHTS RVU= 27.60 A/V
CIM=60-1 F/D RI

M/D=1188 A/C=C COV=D DCA
CHTS RVU=165.40 A/V
CIM=60-1 F/D RI

M/D=1188 A/C=E COV=D DCA
CIM=60-1 F/D RI

M/D=1188 A/C=C COV=D DCA
CIM=60-1 F/D RI

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HCFA COMMON PROCEDURE CODING SYSTEM

E1600 DELIVERY AND/OR INSTALLATION CHARGES FOR RENAL DIALYSIS EQUIPMENT

```

* M/D=1189 A/C=F COV=D DCA
* XR4 XR5 IC=R SLHA
* CHTS RVU= BR A/V
* CIM=60-1 F/D RI
* MCM 2100.4

```

E1610 REVERSE OSMOSIS WATER PURIFICATION SYSTEM

```

* M/D=1189 A/C=F COV=D DCA
* CHTS RVU= 33.10 A/V
* CIM=55-1B F/D RI

```

E1615 DEIONIZER WATER PURIFICATION SYSTEM

```

* M/D=1189 A/C=F COV=D DCA
* CIM=55-1B F/D RI

```

E1620 BLOOD PUMP FOR DIALYSIS

```

* M/D=1188 A/C=C COV=D DCA
* CHTS RVU= 23.90 A/V
* CIM=60-1 F/D PI

```

E1625 WATER SOFTENING SYSTEM

```

* M/D=1189 A/C=F COV=M DCA
* CIM=55-1B F/D RI

```

E1630 RECIPROCATING PERITONEAL DIALYSIS SYSTEM

```

* M/D=1188 A/C=C COV DCA
* CHTS RVU= BR A/V

```

E1632 WEARABLE ARTIFICIAL KIDNEY

```

* M/D=1188 A/C=E COV=D DCA
* CIM=60-1 F/D RI

```

E1635 COMPACT (PORTABLE) TRAVEL HEMODIALYZER SYSTEM

```

* M/D=1188 A/C=C COV=D DCA
* XR4 XR5 IC=R SLHA
* CHTS RVU= BR A/V
* CIM=60-1 F/D RI

```

E1636 SORBENT CARTRIDGES, PER CASE

```

* M/D=1188 A/C=E COV=D DCA
* CIM=60-1 F/D RI

```

E1640 REPLACEMENT COMPONENTS FOR HEMODIALYSIS AND/OR PERITONEAL DIALYSIS MACHINES THAT ARE OWNED OR BEING PURCHASED BY THE PATIENT

```

* M/D=1189 A/C=F COV=D DCA
* CHTS RVU= BR A/V
* CIM=60-1 F/D RI
* MCM 2100.4

```

E1699 DIALYSIS EQUIPMENT, UNSPECIFIED, BY REPORT

```

* M/D=1188 A/C=E COV=D DCA
* CIM=60-1 F/D RI

```

REHABILITATIVE SERVICES H5000 - H6000

H5000 RESIDENTIAL CARE IN PUBLIC INSTITUTION

H5010 THERAPY, INDIVIDUAL, BY SOCIAL WORKER, PSY. NURSE, ETC. PER HR.

H5020 PSYCHOTHERAPY, GROUP (MAXIMUM 8 PERSONS PER GROUP, 45-50 MINUTES,
PER PERSON, PER SESSION)H5025 PSYCHOTHERAPY, GROUP (MAXIMUM 8 PERSONS PER GROUP; 90 MINUTES,
PER PERSON, PER SESSION)

H5030 OTHER SERVICES BY SOCIAL WORKER, PSY. NURSE, ETC. PER HR.

H5040 RESIDENTIAL CARE IN PUBLIC INSTITUTION

H5050 RESIDENTIAL CARE IN PRIVATE INSTITUTION

H5060 PUBLIC SPECIAL SCHOOLS OR DAY CARE CENTERS

H5090 SPECIAL CLASS PRIVATE

H5100 SPECIAL CLASS PRIVATE PROPRIETARY

H5110 SUMMER TREATMENT CAMP

H5120 SPECIALIZED CARE NURSING HOME, CONVALESCENT HOSPITAL,
CONVALESCENT HOME

H5130 VISITING TEACHER SERVICES

H5160 READING THERAPY

H5170 OTHER SPECIAL EDUCATION OR VOCATIONAL SERVICES

M/D=1188 A/C=D COV=M DCA
XR1=H5040 XR2 XR3
CNTS RVU= BR A/V

M/D=1189 A/C=F COV=D DCA
CNTS RVU= BR A/V
CIM=35-22 F/D RI

M/D=1189 A/C=F COV=D DCA
CNTS RVU= BR A/V
CIM=35-22 F/D RI

M/D=1189 A/C=F COV=D DCA
CIM=35-22 F/D RI

M/D= 986 A/C=E COV=M DCA
CNTS RVU= BR A/V

M/D=1181 A/C COV=M DCA
CNTS RVU= BR A/V

M/D=1181 A/C COV=M DCA
CNTS RVU= BR A/V

M/D=1181 A/C COV=M DCA
CNTS RVU= BR A/V

M/D=1181 A/C COV=M DCA
CNTS RVU= BR A/V

M/D=1181 A/C COV=M DCA
CNTS RVU= BR A/V

M/D=1181 A/C COV=M DCA
CNTS RVU= BR A/V

M/D=1185 A/C=C COV=M DCA
CNTS RVU= BR A/V

M/D=1181 A/C COV=M DCA
CNTS RVU= BR A/V

M/D=1181 A/C COV=M DCA
CNTS RVU= BR A/V

M/D=1181 A/C COV=M DCA
CNTS RVU= BR A/V

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H5180 TRANSPORTATION FOR HANDICAPPED

H5190 NURSING CARE, HOME

H5200 NURSING CARE, OTHER

H5220 REHABILITATIVE EVALUATION, 0-20 MINUTES

H5230 REHABILITATIVE EVALUATION, 21-40 MINUTES

H5240 REHABILITATIVE EVALUATION, 41-60 MINUTES

H5299 REHABILITATIVE EVALUATION, NOT OTHERWISE CLASSIFIED

H5300 OCCUPATIONAL THERAPY

HCFA COMMON PROCEDURE CODING SYSTEM

```

* M/D=1181 A/C COV=M DCA
* CNTS RVU= BR A/V
*
* M/D=1185 A/C=C COV=M DCA
* CNTS RVU= BR A/V
*
* M/D=1185 A/C=C COV=M DCA
* CNTS RVU= BR A/V
*
* M/D=1184 A/C COV DCA
* CNTS RVU= BR A/V
*
* M/D=1181 A/C COV DCA
* CNTS RVU= BR A/V
*
* M/D=1181 A/C COV DCA
* CNTS RVU= BR A/V
*
* M/D=1189 A/C=F COV=D DCA
* MCM 2217 2215 2480
*

```


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HCFA COMMON PROCEDURE CODING SYSTEM

DRUGS ADMINISTERED OTHER THAN ORAL METHOD (EXCEPTION: ORAL IMMUNOSUPPRESSIVE DRUGS) J0000 - J8999

THE FOLLOWING LIST OF DRUGS CAN BE INJECTED EITHER SUBCUTANEOUS, INTRAMUSCULAR, OR INTRAVENOUS

NOTE: THIRD PARTY PAYORS MAY WISH TO DETERMINE A THRESHOLD AND PAY UP TO A CERTAIN DOLLAR LIMIT BEFORE DEVELOPING FOR THE DRUG. USE PROCEDURE CODE J0110 FOR PROCESSING THESE CASES.

J0110 ADMINISTRATION OF INJECTION, INCLUDING THE COST OF DRUG

J0120 INJECTION, TETRACYCLINE, UP TO 250 MG

J0130 INJECTION, ACTEST GEL

J0140 INJECTION, ACTH, UP TO 40 UNITS

J0150 INJECTION, ACTHAR, UP TO 40 UNITS

J0160 INJECTION, ADENOSINE-5-MONOPHOSPHATE, ALSO KNOWN AS ADENOCREST, OR ADENOLIN FORTE OR MY-8-DEN UP TO 25 MG

J0170 INJECTION, ADRENALIN, EPINEPHRINE, UP TO 1 ML AMPULE

J0180 INJECTION, ADRENOSOL SALICYLATE, UP TO 10 MG

J0190 INJECTION, SIPERIDEN, 2 MG

J0200 INJECTION, ALBAMYCIN, NOV08ICIN, UP TO 500 MG

M/D=1187 A/C=C DCA
M/D=1187 A/C=C DCA

M/D=1189 A/C=F COV=D DCA
MCM 2050.5

M/D=1189 A/C=F COV=D DCA
ILC SP=B SA
CIM F/D RI=I
MCM 2050.5

M/D=1189 A/C=D COV DCA
XR1=J0800 XR2 XR3
ILC SP=P SA
CIM F/D RI=I

M/D=1189 A/C=D COV DCA
XR1=J0800 XR2 XR3
ILC SP=P SA
CIM F/D RI=I

M/D=1189 A/C=D COV DCA
XR1=J0800 XR2 XR3
ILC SP=P SA
CIM F/D RI=I

M/D=1189 A/C=D COV DCA

M/D=1189 A/C=F COV=D DCA
ILC SP=D SA
MCM 2050.5

M/D=1189 A/C=D COV DCA

M/D=1189 A/C=C COV=D DCA
CIM F/D RI=I
MCM 2050.5

M/D=1189 A/C=D COV DCA
ILC SP=B SA
CIM F/D RI=I

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HCFA COMMON PROCEDURE CODING SYSTEM

J0210 INJECTION, METHYLDOPATE HCL, UP TO 250 MG

J0220 INJECTION, ALLERGY DESENSITIZATION, AQUEOUS PREPARATION

J0230 INJECTION, ALLERGY DESENSITIZATION, ALLPYRAL

J0240 INJECTION, ALLERGY DESENSITIZATION, EMULSION NOT SPECIFIED

J0250 INJECTION, ALPEN-N, UP TO 500 MG

J0255 INJECTION, ALPHA REDISOL

J0256 INJECTION, ALPHA 1 - PROTEINASE INHIBITOR - HUMAN

J0260 INJECTION, ALTO PRED, UP TO 20 MG

J0270 INJECTION, AMCILL-S, UP TO 500 MG

J0280 INJECTION, AMINOPHYLLIN, UP TO 250 MG

J0290 INJECTION, AMPICILLINE, UP TO 500 MG

J0300 INJECTION, AMOBARBITAL, UP TO 125 MG

J0310 INJECTION, ANDRESTRAQ, UP TO 1 ML

*	M/D=1189	A/C=C	COV=D	DCA
*	CIM		F/D	RI=I
*	MCM	2050.5		
*	M/D=1189	A/C=F	COV=D	DCA
*	MCM	2050.5		
*	M/D=1189	A/C=F	COV=D	DCA
*	MCM	2050.5		
*	M/D=1189	A/C=F	COV=D	DCA
*	ILC			SP=D SA
*	MCM	2050.5		
*	M/D=1188	A/C=D	COV=D	DCA
*	ILC			SP=B SA
*	CIM		F/D	RI=I
*	M/D=1189	A/C=D	COV=D	DCA
*	XR1=J3420	XR2		XR3
*	CIM=45-4		F/D	RI
*	M/D=1189	A/C=F	COV=D	DCA
*	MCM	2050.5		
*	M/D=1189	A/C=D	COV	DCA
*	ILC			SP=P SA
*	CIM		F/D	RI=I
*	M/D=1189	A/C=D	COV	DCA
*	XR1=J0290	XR2		XR3
*	ILC			SP=B SA
*	CIM		F/D	RI=I
*	M/D=1189	A/C=F	COV=D	DCA
*	CIM		F/D	RI=I
*	MCM	2050.5		
*	M/D=1189	A/C=F	COV=D	DCA
*	ILC			SP=B SA
*	CIM		F/D	RI=I
*	MCM	2050.5		
*	M/D=1189	A/C=C	COV=D	DCA
*	CIM		F/D	RI=I
*	MCM	2050.5		
*	M/D=1189	A/C=D	COV	DCA

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HCFA COMMON PROCEDURE CODING SYSTEM

J0320 INJECTION, ANDRONAQ, UP TO 50MG

J0330 INJECTION, SUCCINYLCHOLINE CHLORIDE, UP TO 20 MG

J0340 INJECTION, HANDBOLONE PHENPROPIONATE, UP TO 50 MG

J0350 INJECTION, AHSOLYSEN TARTRATE, UP TO 10 MG

J0360 INJECTION, HYDRALAZINE HCL, UP TO 20 MG

J0380 INJECTION, METARAMINDL UP TO 10 MG

J0390 INJECTION, CHLOROQUINE HCL, UP TO 50 MG

J0400 INJECTION, TRIMETHAPHAN, UP TO 50 MG

J0410 INJECTION, ARIDOSE, 10 CC VIAL

J0420 INJECTION, ARISTOCORT FORTE, UP TO 40 MG OR 1 CC

J0430 INJECTION, ARISTOSPAN, UP TO 40 MG

J0440 INJECTION, ATABRINE HCL, UP TO 200 MG OR 10 CC VIAL

J0450 INJECTION, ARTHROLATE, UP TO 50 MG

J0460 INJECTION, ATROPINE SULFATE, UP TO 0.3 MG

*	M/D=1189 A/C=D	COV	DCA
*	XR1=J3140	XR2	XR3
*	M/D=1189 A/C=C	COV=D	DCA
*	CIM	F/D	RI=I
*	MCM	2050.5	
*	M/D=1189 A/C=C	COV=D	DCA
*	ILC		SP=P SA
*	MCM	2050.5	
*	M/D=1189 A/C=D	COV	DCA
*	M/D=1189 A/C=C	COV=D	DCA
*	CIM	F/D	RI=I
*	MCM	2050.5	
*	M/D=1189 A/C=C	COV=D	DCA
*	CIM	F/D	RI=I
*	MCM	2050.5	
*	M/D=1189 A/C=D	COV	DCA
*	M/D=1189 A/C=D	COV	DCA
*	XR1=J3300	XR2	XR3
*	ILC		SP=P SA
*	MCM	2050.5	
*	M/D=1189 A/C=D	COV	DCA
*	XR1=J3300	XR2	XR3
*	ILC		SP=P SA
*	MCM	2050.5	
*	M/D=1189 A/C=D	COV	DCA
*	CIM	F/D	RI=I
*	M/D=1189 A/C=D	COV	DCA
*	ILC		SP=P SA
*	CIM	F/D	RI=I
*	M/D=1189 A/C=F	COV=D	DCA
*	ILC		SP=D SA
*	MCM	2050.5	

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HCFA COMMON PROCEDURE CODING SYSTEM

J0470 INJECTION, DIMECAPROL, UP TO 100 MG

J0480 INJECTION, BELLAFOLINE, UP TO 0.5 MG

J0490 INJECTION, BENADRYL HCL, UP TO 50 MG

J0500 INJECTION, DICYCLOMINE, UP TO 20 MG

J0510 INJECTION, BENZQUINAMIDE HCL, UP TO 50 MG

J0515 INJECTION, BENZTROPINE

J0520 INJECTION, BETHANECHOL CHLORIDE, MYOTONACHOL OR URECHOLINE,
UP TO 5 MGJ0530 INJECTION, PENICILLIN G BENZATHINE AND PENICILLIN G PROCAINE,
UP TO 600,000 UNITSJ0540 INJECTION, PENICILLIN G BENZATHINE AND PENICILLIN G PROCAINE,
UP TO 1,200,000 UNITSJ0550 INJECTION, PENICILLIN G BENZATHINE AND PENICILLIN G PROCAINE,
UP TO 2,400,000 UNITS

J0560 INJECTION, PENICILLIN G BENZATHINE, UP TO 600,000 UNITS

J0570 INJECTION, PENICILLIN G BENZATHINE, UP TO 1,200,000 UNITS

J0580 INJECTION, PENICILLIN G BENZATHINE, UP TO 2,400,000 UNITS

J0590 INJECTION, ETHYLNOREPINEPHRINE HCL, 1 ML

M/D=1189 A/C=C COV=D DCA
MCM 2050.5

M/D=1189 A/C=D COV DCA

M/D=1189 A/C=D COV DCA
XR1=J1200 XR2 XR3
CIM F/D RI=IM/D=1189 A/C=C COV=D DCA
MCM 2050.5M/D=1189 A/C=C COV=D DCA
CIM F/D RI=I
MCM 2050.5M/D=1189 A/C=F COV=D DCA
MCM 2050.5M/D=1189 A/C=F COV=D DCA
MCM 2050.5M/D=1189 A/C=C COV=D DCA
ILC SP=B SA
MCM 2050.5M/D=1189 A/C=C COV=D DCA
ILC SP=D SA
MCM 2050.5M/D=1189 A/C=C COV=D DCA
ILC SP=D SA
MCM 2050.5M/D=1189 A/C=C COV=D DCA
ILC SP=B SA
MCM 2050.5M/D=1189 A/C=C COV=D DCA
ILC SP=D SA
MCM 2050.5M/D=1189 A/C=C COV=D DCA
ILC SP=D SA
MCM 2050.5M/D=1189 A/C=C COV=D DCA
MCM 2050.5

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HCFA COMMON PROCEDURE CODING SYSTEM

J0600 INJECTION, EDETATE CALCIUM DISODIUM, UP TO 200 MG

```

* M/D=1189 A/C=C COV=D DCA
* CIM F/D RI=I
* MCM 2050.5

```

J0610 INJECTION, CALCIUM GLUCONATE, UP TO 10 ML

```

* M/D=1189 A/C=F COV=D DCA
* CIM F/D RI=I
* MCM 2050.5

```

J0620 INJECTION, CALCIUM GLYCEROPHOSPHATE AND CALCIUM LACTATE, UP TO 50 MG

```

* M/D=1189 A/C=C COV=D DCA
* CIM F/D RI=I
* MCM 2050.5

```

J0630 INJECTION, CALCITONIN SALMON, UP TO 400 UNITS

```

* M/D=1189 A/C=C COV=D DCA
* MCM 2050.5

```

J0640 INJECTION, LEUCOVORIN CALCIUM, PER 50 MG

```

* M/D=1189 A/C=C COV=D DCA
* MCM 2050.5

```

J0650 INJECTION, CALSCORBATE, UP TO 100 MG

```

* M/D=1189 A/C=D COV DCA
* CIM F/D RI=I

```

J0660 INJECTION, CAMUSOL

```

* M/D=1189 A/C=D COV DCA

```

J0670 INJECTION, MEPIVACAINE

```

* M/D=1189 A/C=C COV=D DCA
* MCM 2050.5

```

J0680 INJECTION, DESLANOSIDE, UP TO 0.4 MG

```

* M/D=1189 A/C=C COV=D DCA
* CIM F/D RI=I
* MCM 2050.5

```

J0690 INJECTION, CEFAZOLIN SODIUM, UP TO 500 MG

```

* M/D=1189 A/C=C COV=D DCA
* ILC SP=D SA
* CIM RI=I
* MCM 2050.5

```

J0695 INJECTION, CEFONICID SODIUM, 1 GRAM

```

* M/D=1189 A/C=F COV=D DCA
* MCM 2050.5

```

J0696 INJECTION, CEFTRIAXONE SODIUM, PER 250 MG

```

* M/D=1189 A/C=A COV=D DCA=90
* MCM 2050.5

```

J0697 INJECTION, STERILE CEFUROXIME SODIUM, PER 750 MG

```

* M/D=1189 A/C=A COV=D DCA=90
* MCM 2050.5

```

J0700 INJECTION, BETAMETHASONE, UP TO 6 MG

```

* M/D=1189 A/C=C COV=D DCA
* ILC SP=P SA
* MCM 2050.5

```

J0710 INJECTION, CEPHAPIRIN SODIUM, UP TO 1 GM

```

* M/D=1189 A/C=C COV=D DCA
* ILC SP=D SA
* CIM RI=I
* MCM 2050.5

```

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HCFA COMMON PROCEDURE CODING SYSTEM

J0720 INJECTION, CHLORAMPHENICOL SODIUM SUCCINATE, UP TO 1 GM

J0725 INJECTION, CHORIONIC GONADOTROPIN

J0730 INJECTION, CHLORPHENIRAMINE MALEATE, UP TO 200 MG

J0740 INJECTION, CHROMAGEN, UP TO 50 MG

J0745 INJECTION, CODEINE PHOSPHATE

J0750 INJECTION, COGENTIN MESYLATE, UP TO 1 MG

J0760 INJECTION, COLCHICINE, UP TO 2MG

J0770 INJECTION, COLISTIMETHATE SODIUM, UP TO 150 MG

J0780 INJECTION, PROCHLORPERAZINE, UP TO 10 MG

J0790 INJECTION, NIKETHAMIDE, UP TO 1.5 ML

J0800 INJECTION, CORTICOTROPIN, UP TO 40 UNITS

J0810 INJECTION, CORTISONE, UP TO 50 MG

J0820 INJECTION, CORTIQEL 40, UP TO 40 UNITS

```

*      M/D=1189 A/C=C COV=D DCA
*      CIM      F/D      RI=I
*      MCM 2050.5
*
*      M/D=1189 A/C=F COV=D DCA
*      MCM 2050.5
*
*      M/D=1189 A/C=C COV=D DCA
*      CIM      F/D      RI=I
*      MCM 2050.5
*
*      M/D=1189 A/C=D COV      DCA
*      XR4      XR5      IC=R SLHA
*
*      M/D=1189 A/C=F COV=D DCA
*      MCM 2050.5
*
*      M/D=1189 A/C=D COV      DCA
*      XR1=J0515 XR2      XR3
*      CIM      F/D      RI=I
*
*      M/D=1189 A/C=F COV=D DCA
*      CIM      F/D      RI=I
*      MCM 2050.5
*
*      M/D=1189 A/C=C COV=D DCA
*      ILC      SP=P SA
*      CIM      F/D      RI=I
*      MCM 2050.5
*
*      M/D=1189 A/C=C COV=D DCA
*      MCM 2050.5
*
*      M/D=1189 A/C=F COV=D DCA
*      ILC      SP=P SA
*      MCM 2050.5
*
*      M/D=1189 A/C=F COV=D DCA
*      ILC      SP=P SA
*      MCM 2050.5

```

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HCFA COMMON PROCEDURE CODING SYSTEM

J0830 INJECTION, CORTROPHIN ZINC HYDROXIDE, UP TO 40 UNITS

J0840 INJECTION, WARFARIN SODIUM, UP TO 50 MG

J0850 INJECTION, CRYSTICILLIN 300 AS, CRYSTICILLIN 600 AS, UP TO 600,000 UNITS

J0860 INJECTION, CRYSTODIGIN, DIGITOXIN, UP TO 0.2 MG

J0870 INJECTION, CYCLAMINE

J0880 INJECTION, CYCLOGESTERIN, UP TO 1 ML

J0890 INJECTION, DECADRON PHOSPHATE, UP TO 4 MG

J0900 INJECTION, TESTOSTERONE ENANTHATE AND ESTRADIOL VALERATE, UP TO 1 CC

J0945 INJECTION, BROMPHENIRAMINE MALEATE

J0950 INJECTION, DELALUTIN, UP TO 250 MG

J0960 INJECTION, DELATESTYL, UP TO 200 MG

J0970 INJECTION, ESTRADIOL VALERATE, UP TO 40 MG

J0980 INJECTION, DELUTEVAL 2X, UP TO 1 ML

J0990 INJECTION, DEMEROL HCL, UP TO 100 MG

J0995 INJECTION, DEPINAR

M/D=1189 A/C=C COV=D DCA
ILC SP=P SA
NCM 2050.5

M/D=1189 A/C=C COV=D DCA
CIM F/D RI=I
NCM 2050.5

M/D=1189 A/C=D COV DCA
XR1=J2510 XR2 XR3
ILC SP=P SA

M/D=1189 A/C=D COV DCA
XR1=J1155 XR2 XR3
CIM F/D RI=I

M/D=1189 A/C=D COV DCA

M/D=1189 A/C=D COV DCA

M/D=1189 A/C=D COV DCA
XR1=J1100 XR2 XR3
ILC SP=P SA
CIM F/D RI=I

M/D=1189 A/C=C COV=D DCA
NCM 2050.5

M/D=1189 A/C=C COV=D DCA
NCM 2050.5

M/D=1187 A/C=D COV DCA

M/D=1189 A/C=D COV DCA
XR1=J3130 XR2 XR3

M/D=1189 A/C=C COV=D DCA
NCM 2050.5

M/D=1189 A/C=D COV DCA

M/D=1189 A/C=D COV DCA
XR1=J2175 XR2 XR3
ILC SP=P SA
CIM F/D RI=I

M/D=1189 A/C=D COV DCA
XR1=J3420 XR2=X XR3

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HCFA COMMON PROCEDURE CODING SYSTEM

J1000 INJECTION, DEPO-ESTRADIOL CYPIONATE, UP TO 5 MG

J1010 INJECTION, DEPO-HEPARIN SODIUM, 20,000 UNITS

J1020 INJECTION, METHYLPREDNISOLONE ACETATE, 20 MG

J1030 INJECTION, METHYLPREDNISOLONE ACETATE, 40 MG

J1040 INJECTION, METHYLPREDNISOLONE ACETATE, 80 MG

J1050 INJECTION, MEDROXYPROGESTERONE ACETATE, UP TO 100 MG

J1060 INJECTION, TESTOSTERONE CYPIONATE AND ESTRADIOL CYPIONATE, UP TO 1 ML

J1070 INJECTION, TESTOSTERONE CYPIONATE, UP TO 100 MG

J1080 INJECTION, TESTOSTERONE CYPIONATE, 1 CC, 200 MG

J1090 INJECTION, TESTOSTERONE CYPIONATE, 1 CC, 50 MG

J1100 INJECTION, DEXAMETHOSONE SODIUM PHOSPHATE, UP TO 4MG/ML

J1110 INJECTION, DEHYDROERGOTAMINE, UP TO 1 MG

J1120 INJECTION, ACETAZOLAMIDE SODIUM, UP TO 500 MG

J1130 INJECTION, DICURIN PROCAINE, UP TO 10 ML

J1140 INJECTION, DI-GENIX, UP TO 1 ML

M/D=1189 A/C=F CDV=D DCA
MCM 2050.5

M/D=1189 A/C=D CDV=D DCA

M/D=1189 A/C=C CDV=D DCA
ILC SP=P SA
MCM 2050.5

M/D=1189 A/C=C CDV=D DCA
ILC SP=P SA
MCM 2050.5

M/D=1189 A/C=C CDV=D DCA
ILC SP=P SA
MCM 2050.5

M/D=1189 A/C=C CDV=D DCA
CHTS=0009 RVU A/V
MCM 2050.5

M/D=1189 A/C=C CDV=D DCA
MCM 2050.5

M/D=1189 A/C=C CDV=D DCA
MCM 2050.5

M/D=1189 A/C=C CDV=D DCA
MCM 2050.5

M/D=1189 A/C=C CDV=D DCA
ILC SP=P SA
MCM 2050.5

M/D=1189 A/C=C CDV=D DCA
CIM F/D RI=I
MCM 2050.5

M/D=1189 A/C=C CDV=D DCA
CIM F/D RI=I
MCM 2050.5

M/D=1187 A/C=D CDV DCA
CIM F/D RI=I

M/D=1189 A/C=D CDV DCA

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HCFA COMMON PROCEDURE CODING SYSTEM

J1150 INJECTION, DIGITALINE NATIVELLE, UP TO 0.4 MG

J1155 INJECTION, DIGITOXIN

J1160 INJECTION, DIGOXIN, UP TO 0.5 MG

J1165 INJECTION, PHENYTOIN SODIUM

J1170 INJECTION, HYDROMORPHONE, UP TO 4 MG

J1180 INJECTION, DYPHYLLINE, UP TO 500 MG

J1190 INJECTION, DIMETANE-TEN AND DIMETANE-100

J1200 INJECTION, DIPHENHYDRAMINE HCL, UP TO 50 MG

J1205 INJECTION, CHLOROTHIAZIDE SODIUM

J1210 INJECTION, DIURNAL-PENICILLIN, UP TO 500,000 UNITS

J1212 INJECTION, DMSO, DIMETHYL SULFOXIDE

J1220 INJECTION, DOCA ACETATE, UP TO 5 MG

J1230 INJECTION, METHADONE HCL, UP TO 10 MG

J1240 INJECTION, DIMENHYDRINATE, UP TO 50 MG

M/D=1189 A/C=D COV DCA

M/D=1189 A/C=F COV=D DCA

MCM 2050.5

M/D=1189 A/C=F COV=D DCA

CIM F/D RI=I

MCM 2050.5

M/D=1189 A/C=C COV=D DCA

MCM 2050.5

M/D=1189 A/C=C COV=D DCA

CIM F/D RI=I

MCM 2050.5

M/D=1189 A/C=C COV=D DCA

MCM 2050.5

M/D=1189 A/C=D COV DCA

XR1=J0945 XR2 XR3

CIM F/D RI=I

M/D=1189 A/C=C COV=D DCA

CIM F/D RI=I

MCM 2050.5

M/D=1189 A/C=C COV=D DCA

MCM 2050.5

M/D=1189 A/C=D COV DCA

XR1=J0530 XR2=J0580 XR3=J2510

XR4=J2540 XR5 IC SLHA

ILC SP=P SA

M/D=1189 A/C=C COV=D DCA

CIM=45-23 F/D RI

MCM 2050.5

M/D=1187 A/C=D COV DCA

ILC SP=P SA

M/D=1189 A/C=C COV=D DCA

MCM 2050.5

M/D=1189 A/C=C COV=D DCA

CIM F/D RI=I

MCM 2050.5

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HCFA COMMON PROCEDURE CODING SYSTEM

J1250 INJECTION, DRIZE, UP TO 2 ML

J1260 INJECTION, DUOVAL P.A., UP TO 1 ML

J1270 INJECTION, DUOVAL 2X-P.A., UP TO 1 ML

J1280 INJECTION, DURABOLIN, DURABOLIN-50, UP TO 50 MG

J1290 INJECTION, DURACILLIN AS, UP TO 600,000 UNITS

J1300 INJECTION, DURATRAD, UP TO 10 MG

J1310 INJECTION, E-IONATE-P.A., UP TO 5 MG

J1320 INJECTION, AMITRIPTYLINE HCL, UP TO 20 MG

J1330 INJECTION, ERGONOVINE MALEATE, UP TO 0.2 MG

J1340 INJECTION, AQUEOUS OR SALINE PLACEBO

J1350 INJECTION, ERYTHROMYCIN-IM, UP TO 100 MG

J1360 INJECTION, ERYTHROMYCIN-IV, UP TO 500 MG

J1370 INJECTION, ESCHATIN, UP TO 10 ML

J1380 INJECTION, ESTRADIOL VALERATE, UP TO 10 MG

J1390 INJECTION, ESTRADIOL VALERATE, UP TO 20 MG

```

*      M/D=1189 A/C=D COV   DCA
*
*      M/D=1189 A/C=D COV   DCA
*      XR1=J0900 XR2       XR3
*
*      M/D=1189 A/C=D COV   DCA
*      XR1=J0900 XR2       XR3
*
*      M/D=1189 A/C=D COV=D DCA
*      XR1=J0340 XR2       XR3
*      ILC                 SP=P SA
*      MCM 2050.5
*
*      M/D=1189 A/C=D COV   DCA
*      XR1=J2510 XR2       XR3
*      ILC                 SP=P SA
*
*      M/D=1189 A/C=D COV   DCA
*
*      M/D=1189 A/C=D COV   DCA
*      XR1=J1000 XR2       XR3
*
*      M/D=1189 A/C=C COV=D DCA
*      MCM 2050.5
*
*      M/D=1189 A/C=C COV=D DCA
*      CIM                 F/D   RI=I
*      MCM 2050.5
*
*      M/D=1189 A/C=F COV=D DCA
*      MCM 2050.5
*
*      M/D=1189 A/C=C COV=D DCA
*      ILC                 SP=B SA
*      MCM 2050.5
*
*      M/D=1189 A/C=C COV=D DCA
*      CIM                 F/D   RI=I
*      MCM 2050.5
*
*      M/D=1189 A/C=D COV   DCA
*      ILC                 SP=P SA
*      CIM                 F/D   RI=I
*
*      M/D=1189 A/C=C COV=D DCA
*      MCM 2050.5
*
*      M/D=1189 A/C=C COV=D DCA
*      MCM 2050.5

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NCFA COMMON PROCEDURE CODING SYSTEM

J1400 INJECTION, ESTRADIOL, UP TO 0.25 MG

J1405 INJECTION, ESTRADURIN

J1410 INJECTION, ESTROGEN CONJUGATED, UP TO 2 MG OR 20,000 UNITS

J1420 INJECTION, ESTRONOL, UP TO 2 MG OR 20,000 UNITS

J1430 INJECTION, ESTATE, UP TO 10 MG

J1435 INJECTION, ESTRONE

J1436 INJECTION, ETIDRONATE DISODIUM, PER 300 MG

J1440 INJECTION, FELLOZINE, UP TO 50 MG

J1450 INJECTION, FEMOGEN LA, UP TO 40 MG

J1460 INJECTION, GAMMA GLOBULIN, INTRAMUSCULAR, 1 CC

J1470 INJECTION, GAMMA GLOBULIN, INTRAMUSCULAR, 2 CC

J1480 INJECTION, GAMMA GLOBULIN, INTRAMUSCULAR, 3 CC

J1490 INJECTION, GAMMA GLOBULIN, INTRAMUSCULAR, 4 CC

J1500 INJECTION, GAMMA GLOBULIN, INTRAMUSCULAR, 5 CC

J1510 INJECTION, GAMMA GLOBULIN, INTRAMUSCULAR, 6 CC

J1520 INJECTION, GAMMA GLOBULIN, INTRAMUSCULAR, 7 CC

J1530 INJECTION, GAMMA GLOBULIN, INTRAMUSCULAR, 8 CC

M/D=1189 A/C=D CDV DCA

M/D=1187 A/C=D CDV DCA
XR1=J9295 XR2 XRSM/D=1189 A/C=C CDV=D DCA
CIM F/D RI=I
MCM 2050.5M/D=1189 A/C=D CDV DCA
XR1=J1435 XR2 XRS

M/D=1189 A/C=D CDV DCA

M/D=1189 A/C=F CDV=D DCA
MCM 2050.5M/D=1189 A/C=A CDV=D DCA=90
MCM 2050.5

M/D=1189 A/C=D CDV DCA

M/D=1189 A/C=D CDV DCA
XR1=J1435 XR2 XRSM/D=1189 A/C=C CDV=D DCA
MCM 2050.5M/D=1189 A/C=C CDV=D DCA
MCM 2050.5M/D=1189 A/C=C CDV=D DCA
MCM 2050.5M/D=1189 A/C=C CDV=D DCA
MCM 2050.5M/D=1189 A/C=C CDV=D DCA
MCM 2050.5M/D=1189 A/C=C CDV=D DCA
MCM 2050.5M/D=1189 A/C=C CDV=D DCA
MCM 2050.5M/D=1189 A/C=C CDV=D DCA
MCM 2050.5

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HCFA COMMON PROCEDURE CODING SYSTEM

J1540 INJECTION, GAMMA GLOBULIN, INTRAMUSCULAR, 9 CC

J1550 INJECTION, GAMMA GLOBULIN, INTRAMUSCULAR, 10 CC

J1560 INJECTION, GAMMA GLOBULIN, INTRAMUSCULAR, OVER 10 CC

J1561 INJECTION, IMMUNE GLOBULIN, INTRAVENOUS, PER 500 MG.

J1570 INJECTION, GANPHEN, UP TO 50 MG

J1580 INJECTION, GARAMYCIN, GENTAMICIN, UP TO 80 MG

J1590 INJECTION, GLUKOR, UP TO 1 ML

J1600 INJECTION, GOLD SODIUM THIOALEATE, UP TO 50 MG

J1610 INJECTION, GOMENOL, UP TO 10 ML

J1620 INJECTION, QYMERGEN, ERGOTAMINE TARTRATE, UP TO 0.5 MG

J1630 INJECTION, HALOPERIDOL, UP TO 5 MG

J1631 INJECTION, HALOPERIDOL DECANOATE, PER 50 MG

J1640 INJECTION, HEPARIN SODIUM, 30 ML

J1650 INJECTION, HEXADROL PHOSPHATE, UP TO 4 MG

J1660 INJECTION, HISTAMINE, UP TO 2.75 MG

M/D=1189 A/C=C COV=D DCA
MCM 2050.5M/D=1189 A/C=C COV=D DCA
MCM 2050.5M/D=1189 A/C=C COV=D DCA
MCM 2050.5M/D=1189 A/C=A COV=D DCA=90
MCM 2050.5M/D=1189 A/C=D COV=D DCA
XR1=J2550 XR2 XR3
CIM F/D RI=I
MCM 2050.5M/D=1189 A/C=F COV=D DCA
ILC SP=P SA
MCM 2050.5M/D=1189 A/C=D COV DCA
XR1=J0725 XR2 XR3M/D=1189 A/C=C COV=D DCA
MCM 2050.5M/D=1189 A/C=D COV DCA
MCM 2050.5

M/D=1189 A/C=D COV DCA

M/D=1189 A/C=F COV=D DCA
MCM 2050.5M/D=1189 A/C=C COV=D DCA
MCM 2050.5M/D=1189 A/C=C COV=D DCA
CIM F/D RI=I
MCM 2050.5M/D=1189 A/C=D COV DCA
XR1=J1100 XR2 XR3
ILC SP=P SA
CIM F/D RI=IM/D=1189 A/C=F COV=D DCA
CIM=35-19 F/D RI
MCM 2050.5

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J1680 INJECTION, HYDELTRASOL, PREDNISOLONE PHOSPHATE, UP TO 20 MG

J1700 INJECTION, HYDROCORTISONE ACETATE, UP TO 25 MG

J1720 INJECTION, HYDROCORTISONE SODIUM SUCCINATE, UP TO 100 MG

J1739 INJECTION, HYDROXYPROGESTERONE CAPROATE 125 MG/ML

J1740 INJECTION, HYDROXYPROGESTERONE CAPROATE, DELALUTIN, UP TO 250 MG

J1741 INJECTION, HYDROXYPROGESTERONE CAPROATE, 250 MG/ML

J1750 INJECTION, HYKINONE, UP TO 10 MG

J1760 INJECTION, IRON DEXTRAN, 2 CC

J1770 INJECTION, IRON DEXTRAN, 5 CC

HCFA COMMON PROCEDURE CODING SYSTEM

ML/D=1189 A/C=C CDV=D DCA
MCM 2050.5

M/D=1189 A/C=D COV DCA
XR1=J2640 XR2 XR3
ILC SP=P SA
CIM F/D RI=I

M/D=1189 A/C=C COV=D DCA
ILC SP=P SA
CIM F/D RI=I
NCM 2050.5

M/D=1189 A/C=C COV=D DCA
ILC SP=P SA
CIM F/D RI=I
MCM 2050.5

M/D=1189 A/C=C COV=D DCA
ILC SP=P SA
CIM F/D RI=I
NCM 2050.5

M/D=1189 A/C=C COV=D DCA
ILC SP=P SA
CIM F/D RI=I
MCM 2050.5

M/D=1189 A/C=C CDV=D DCA
NCM 2050.5

M/D=1189 A/C=C COV=D DCA
NCM 2050.5

M/D=1187 A/C=D COV DCA

M/D=1189 A/C=F COV=D DCA
MCM 2050.5

M/D=1189 A/C=D COV DCA
CIM F/D RI=I

M/D=1189 A/C=C COV=D DCA
CIM F/D RI=I
MCM 2050.5

M/D=1189 A/C=C COV=D DCA
CIM F/D RI=I
MCM 2050.5

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HCFA COMMON PROCEDURE CODING SYSTEM

J1780 INJECTION, IRON DEXTRAN, 10 CC

J1790 INJECTION, DROPERIDOL, UP TO 5 MG

J1800 INJECTION, PROPRANOLOL HCL, UP TO 1 MG

J1810 INJECTION, DROPERIDOL AND FENTANYL CITRATE, UP TO 2 ML AMPULE

J1820 INJECTION, INSULIN, UP TO 100 UNITS

J1830 INJECTION, ISOJECT, STREPTOMYCIN SULFATE, UP TO 1 GRAM

J1840 INJECTION, KANAMYCIN SULFATE, UP TO 500 MG

J1850 INJECTION, KANAMYCIN SULFATE, UP TO 75 MG

J1860 INJECTION, KAPPADIONE, UP TO 10 MG

J1870 INJECTION, KENALOG-10

J1880 INJECTION, KENALOG-40

J1890 INJECTION, CEPHALOTHIN SODIUM, UP TO 1 GRAM

*	M/D=1189	A/C=C	COV=D	DCA
*	CIM		F/D	RI=I
*	MCM	2050.5		
*	M/D=1189	A/C=C	COV=D	DCA
*	CIM		F/D	RI=I
*	MCM	2050.5		
*	M/D=1189	A/C=C	COV=D	DCA
*	CIM		F/D	RI=I
*	MCM	2050.5		
*	M/D=1189	A/C=C	COV=D	DCA
*	CIM		F/D	RI=I
*	MCM	2050.5		
*	M/D=1189	A/C=F	COV=D	DCA
*	MCM	2050.5		
*	M/D=1189	A/C=D	COV	DCA
*	XR1=J3000	XR2		XR3
*	ILC			SP=P SA
*	M/D=1189	A/C=C	COV=D	DCA
*	ILC			SP=P SA
*	CIM		F/D	RI=I
*	MCM	2050.5		
*	M/D=1189	A/C=C	COV=D	DCA
*	CIM		F/D	RI=I
*	MCM	2050.5		
*	M/D=1189	A/C=D	COV	DCA
*	XR1=J3430	XR2		XR3
*	CIM		F/D	RI=I
*	M/D=1189	A/C=D	COV	DCA
*	XR1=J3300	XR2		XR3
*	ILC			SP=P SA
*	M/D=1189	A/C=D	COV	DCA
*	XR1=J3300	XR2		XR3
*	ILC			SP=P SA
*	M/D=1189	A/C=C	COV=D	DCA
*	ILC			SP=B SA
*	CIM		F/D	RI=I
*	MCM	2050.5		

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NCFA COMMON PROCEDURE CODING SYSTEM

J1900 INJECTION, KOWAKION, UP TO 10 MG

J1910 INJECTION, KUTAPRESSIN, UP TO 2 ML

J1920 INJECTION, LANOXIN, UP TO 0.5 MG

J1930 INJECTION, PROPIOMAZINE, UP TO 20 MG

J1940 INJECTION, FUROSEMIDE, UP TO 20 MG

J1950 INJECTION, LERITINE, ANILERIDINE, UP TO 25 MG

J1960 INJECTION, LEVORPHANOL TARTRATE, UP TO 2 MG

J1970 INJECTION, METHOTRIMEPAZINE, UP TO 20 MG

J1980 INJECTION, HYOSCYAMINE SULFATE, UP TO 0.25 MG

J1990 INJECTION, CHLORDIAZEPOXIDE HCL, UP TO 100 MG

J2000 INJECTION, LIDOCAINE HCL, 50 CC

J2010 INJECTION, LINCOMYCIN HCL, UP TO 300 MG

J2020 INJECTION, LIPO-HEPIN

```

*      M/D=1189 A/C=D COV      DCA
*      XR1=J3480 XR2          XR3
*
*      M/D=1189 A/C=F COV=D    DCA
*      MCM 2050.5
*
*      M/D=1189 A/C=D COV      DCA
*      XR1=J1160 XR2          XR3
*      CIM                      F/D      RI=I
*
*      M/D=1189 A/C=C COV=D    DCA
*      CIM                      F/D      RI=I
*      MCM 2050.5
*
*      M/D=1189 A/C=C COV=D    DCA
*      CIM                      F/D      RI=I
*      MCM 2050.5
*
*      M/D=1187 A/C=D COV      DCA
*      CIM                      F/D      RI=I
*
*      M/D=1189 A/C=C COV=D    DCA
*      CIM                      F/D      RI=I
*      MCM 2050.5
*
*      M/D=1189 A/C=C COV=D    DCA
*      CIM                      F/D      RI=I
*      MCM 2050.5
*
*      M/D=1189 A/C=C COV=D    DCA
*      CIM                      F/D      RI=I
*      MCM 2050.5
*
*      M/D=1189 A/C=C COV=D    DCA
*      ILC                      SP=B SA
*      CIM                      F/D      RI=I
*      MCM 2050.5
*
*      M/D=1189 A/C=D COV      DCA
*      XR1=J1640 XR2          XR3
*      CIM                      F/D      RI=I

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HCFA COMMON PROCEDURE CODING SYSTEM

J2030 INJECTION, LIPO-LUTIN IN OIL, PROGESTERONE, UP TO 50 MG

J2040 INJECTION, LIQUAEMIN SODIUM, UP TO 1000 UNITS

J2050 INJECTION, LIVER, UP TO 20 MCG

J2060 INJECTION, LORFAN, UP TO 1 MG

J2070 INJECTION, LORIDINE, 500 MG

J2080 INJECTION, LORIDINE, 1 GR

J2090 INJECTION, LUFYLLIN, UP TO 500 MG

J2100 INJECTION, LUMINAL SODIUM, UP TO 120 MG

J2110 INJECTION, MAL-O-FEM AQUASPENSION, UP TO 1 ML

J2120 INJECTION, MAL-O-FEM IN OIL, UP TO 1 ML

J2130 INJECTION, MALOGEN AQUASPENSION, UP TO 50 MG

J2140 INJECTION, MALOGEN LA IN OIL, UP TO 200 MG

J2150 INJECTION, MANNITOL, 25% IN 50 ML

J2160 INJECTION, CYCLIZINE LACTATE, UP TO 50 MG

J2170 INJECTION, MENFORMON A, UP TO 2 MG

J2175 INJECTION, MEPERIDINE

J2180 INJECTION, MEPERIDINE AND PROMETHAZINE HCL, UP TO 50 MG

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* M/D=1187 A/C=D COV DCA
*
* M/D=1189 A/C=D COV DCA
* XRI=J1640 XR2 XR3
* CIM F/D RI=I
*
* M/D=1189 A/C=F COV=D DCA
* MCM 2050.5
*
* M/D=1189 A/C=D COV DCA
* XRI=J1960 XR2 XR3
* CIM F/D RI=I
* MCM 2050.5
*
* M/D=1189 A/C=D COV DCA
* ILC SP=P SA
*
* M/D=1189 A/C=D COV DCA
* ILC SP=P SA
*
* M/D=1189 A/C=D COV DCA
* XRI=J1180 XR2 XR3
*
* M/D=1189 A/C=F COV=D DCA
* XRI=J2560 XR2 XR3
* CIM F/D RI=I
* MCM 2050.5
*
* M/D=1189 A/C=D COV DCA
*
* M/D=1189 A/C=D COV DCA
*
* M/D=1189 A/C=D COV DCA
*
* M/D=1189 A/C=D COV DCA
*
* M/D=1189 A/C=F COV=D DCA
* MCM 2050.5
*
* M/D=1189 A/C=C COV=D DCA
* MCM 2050.5
*
* M/D=1189 A/C=D COV DCA
*
* M/D=1189 A/C=F COV=D DCA
* MCM 2050.5
*
* M/D=1189 A/C=C COV=D DCA
* CIM F/D RI=I
* MCM 2050.5

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HCFA COMMON PROCEDURE CODING SYSTEM

J2190 INJECTION, MERSALYL WITH THEOPHYLLINE, UP TO 2 ML

J2200 INJECTION, METHAPYRILENE HYDROCHLORIDE, HISTADYL, UP TO 20 MG

J2210 INJECTION, METHYLERGONOVINE MALEATE, UP TO 0.2 MG

J2220 INJECTION, METHYLANDROSTENEDIOL, ALSO KNOWN AS CEMBOLIC, GRI-ACE
HYBOLIN, METHANDRIOL, OR SPENBOLIC, UP TO 50 MG

J2230 INJECTION, METRAZOL, UP TO 100 MG

J2240 INJECTION, METOCURINE IODIDE, UP TO 2 MG

J2250 INJECTION, METYCAINE HCL

J2260 INJECTION, MILTOWN INTRAMUSCULAR, UP TO 400 MG

J2270 INJECTION, MORPHINE SULFATE, UP TO 10 MG

J2280 INJECTION, MYCHEL-S, UP TO 250MG

J2290 INJECTION, MYOCHRYSLINE, UP TO 50 MG

J2300 INJECTION, NAICOL

J2310 INJECTION, NALLINE HCL, UP TO 5 MG

J2320 INJECTION, NANDROLONE DECANOATE, UP TO 50 MG

J2321 INJECTION, NANDROLONE DECANOATE, UP TO 100 MG

M/D=1189	A/C=F	COV=D	DCA
CIM		F/D	RI=I
MCM	2050.5		
M/D=1189	A/C=D	COV	DCA
CIM		F/D	RI=I
M/D=1189	A/C=C	COV=D	DCA
CIM		F/D	RI=I
MCM	2050.5		
M/D=1189	A/C=C	COV	DCA
XR1=J2320	XR2		XR3
M/D=1189	A/C=D	COV	DCA
CIM		F/D	RI=I
M/D=1189	A/C=C	COV=D	DCA
CIM		F/D	RI=I
MCM	2050.5		
M/D=1189	A/C=D	COV	DCA
M/D=1189	A/C=D	COV	DCA
M/D=1189	A/C=C	COV=D	DCA
CIM		F/D	RI=I
MCM	2050.5		
M/D=1189	A/C=D	COV=D	DCA
XR1=J0720	XR2		XR3
ILC			SP=P SA
CIM		F/D	RI=I
MCM	2050.5		
M/D=1189	A/C=D	COV	DCA
XR1=J1600	XR2		XR3
M/D=1189	A/C=D	COV=D	DCA
M/D=1189	A/C=D	COV	DCA
ILC			SP=D SA
CIM		F/D	RI=I
M/D=1189	A/C=F	COV=D	DCA
MCM	2050.5		
M/D=1189	A/C=F	COV=D	DCA
MCM	2050.5		

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HCFA COMMON PROCEDURE CODING SYSTEM

J2922 INJECTION, NANDROLONE DECANOATE, UP TO 200 MG

J2930 INJECTION, THIOTHIXENE, UP TO 4 MG

J2940 INJECTION, NEO-HOMBREOL, UP TO 50 MG

J2950 INJECTION, NIACINAMIDE, NIACIN, UP TO 100 MG

J2960 INJECTION, ORPHENADRINE, UP TO 60 MG

J2970 INJECTION, PHENYLEPHRINE HCL, UP TO 1 ML

J2980 INJECTION, NEOPAVRIN, UP TO 60 MG

J2990 INJECTION, NEOTHYLLINE, UP TO 500 MG

J2400 INJECTION, CHLOROPROCAINE HCL

J2410 INJECTION, OXYMORPHONE HCL, UP TO 1 MG

J2420 INJECTION, NYLOXIN, UP TO 3 ML

J2430 INJECTION, OMNIPEN-N, UP TO 500 MG

J2440 INJECTION, PAPAVERINE HCL, UP TO 60 MG

J2450 INJECTION, OUABAIN, UP TO 0.5 MG

J2460 INJECTION, OXYTETRACYCLINE HCL, UP TO 50 MG

J2470 INJECTION, PAN HEPARIN, UP TO 1000 UNITS

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M/D=1189 A/C=F COV=D DCA
MCM 2050.5

M/D=1189 A/C=C COV=D DCA
MCM 2050.5

M/D=1189 A/C=D COV DCA

M/D=1189 A/C=C COV=D DCA
MCM 2050.5

M/D=1189 A/C=C COV=D DCA
MCM 2050.5

M/D=1189 A/C=C COV=D DCA
CIM F/D RI=I
MCM 2050.5

M/D=1189 A/C=D COV DCA

M/D=1189 A/C=D COV DCA
XR1=J1180 XR2 XR3

M/D=1189 A/C=C COV=D DCA
MCM 2050.5

M/D=1189 A/C=C COV=D DCA
CIM F/D RI=I
MCM 2050.5

M/D=1189 A/C=D COV DCA

M/D=1189 A/C=D COV DCA
XR1=J0290 XR2 XR3
ILC SP=D SA
CIM F/D RI=I

M/D=1189 A/C=F COV=D DCA
MCM 2050.5

M/D=1189 A/C=D COV DCA
CIM F/D RI=I

M/D=1189 A/C=C COV=D DCA
ILC SP=8 SA
CIM F/D RI=I
MCM 2050.5

M/D=1189 A/C=D COV DCA
XR1=J1640 XR2 XR3
CIM F/D RI=I

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HCFA COMMON PROCEDURE CODING SYSTEM

J2480 INJECTION, HYDROCHLORIDES OF OPIUM ALKALOIDS, UP TO 20 MG

M/D=1189	A/C=C	COV=D	DCA
CIM		F/D	RI=I
MCM	2050.5		

J2490 INJECTION, PARALDEHYDE, UP TO 5 ML

M/D=1189	A/C=F	COV=D	DCA
CIM		F/D	RI=I
MCM	2050.5		

J2495 INJECTION, TRIDINEXETHYL CHLORIDE PER 10 MG

M/D=1189	A/C=C	COV=D	DCA
MCM	2050.5		

J2500 INJECTION, PENBRITTIN-S, UP TO 500 MG

M/D=1189	A/C=D	COV	DCA
XR1=J0290	XR2		XR3
ILC			SP=B SA
CIM		F/D	RI=I

J2510 INJECTION, PENICILLIN G PROCAINE, AQUEOUS, UP TO 600,000 UNITS

M/D=1189	A/C=C	COV=D	DCA
ILC			SP=B SA
MCM	2050.5		

J2515 INJECTION, PENTOBARBITAL SODIUM

M/D=1189	A/C=C	COV=D	DCA
MCM	2050.5		

J2520 INJECTION, THIOPENTAL SODIUM

M/D=1189	A/C=C	COV=D	DCA
CIM		F/D	RI=I
MCM	2050.5		

J2530 INJECTION, PERMAPEN ISOJECT, UP TO 600,000 UNITS

M/D=1189	A/C=D	COV	DCA
XR1=J0560	XR2		XR3
ILC			SP=P SA
MCM	2050.5		

J2540 INJECTION, PENICILLIN G POTASSIUM, UP TO 600,000 UNITS

M/D=1189	A/C=C	COV=D	DCA
ILC			SP=P SA
CIM		F/D	RI=I
MCM	2050.5		

J2550 INJECTION, PROMETHAZINE HCL, UP TO 50 MG

M/D=1189	A/C=C	COV=D	DCA
CIM		F/D	RI=I
MCM	2050.5		

J2560 INJECTION, PHENOBARBITAL SODIUM, UP TO 120 MG

M/D=1189	A/C=C	COV=D	DCA
CIM		F/D	RI=I
MCM	2050.5		

J2570 INJECTION, PHYATROMINE-H, UP TO 2 ML

M/D=1189	A/C=D	COV	DCA
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J2580 INJECTION, PIROMEN, UP TO 4 MCG

M/D=1189	A/C=D	COV	DCA
CIM		F/D	RI=I

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HCFA COMMON PROCEDURE CODING SYSTEM

J2590 INJECTION, OXYTOCIN, UP TO 10 UNITS

 W/D=1189 A/C=C CDV=D DCA
 CIM F/D RI=I
 MCM 2050.5

J2595 INJECTION, VASOPRESSIN TANNATE

 W/D=1189 A/C=C CDV=D DCA
 MCM 2050.5

J2600 INJECTION, POSTERIOR PITUITARY, UP TO 10 UNITS

 W/D=1189 A/C=C CDV=D DCA
 MCM 2050.5

J2610 INJECTION, PLASMANATE, UP TO 250 ML

 W/D=1189 A/C=D CDV DCA
 XR1=P9018 XR2 XR3
 CIM F/D RI=I

J2620 INJECTION, POLYCILLIN N, UP TO 500 MG

 W/D=1189 A/C=D CDV DCA
 XR1=J0290 XR2 XR3
 ILC SP=B SA
 CIM F/D RI=I

J2630 INJECTION, PREDALONE, UP TO 1 ML

 W/D=1189 A/C=D CDV DCA
 XR1=J2650 XR2 XR3
 ILC SP=P SA

J2640 INJECTION, PREDNISOLONE SODIUM PHOSPHATE, TO 20 MG

 W/D=1189 A/C=C CDV=D DCA
 ILC SP=P SA
 CIM F/D RI=I
 MCM 2050.5

J2650 INJECTION, PREDNISOLONE ACETATE, UP TO 1 ML

 W/D=1189 A/C=C CDV=D DCA
 ILC SP=P SA
 MCM 2050.5

J2655 INJECTION, PREMARIN

 W/D=1189 A/C=D CDV DCA
 XR1=J1410 XR2 XR3

J2660 INJECTION, PRINCIPEN -N, UP TO 500 MG

 W/D=1188 A/C=D CDV DCA
 XR1=J0290 XR2 XR3
 ILC SP=B SA
 CIM F/D RI=I

J2670 INJECTION, TOLAZOLINE HCL, UP TO 25 MG

 W/D=1189 A/C=C CDV=D DCA
 CIM F/D RI=I
 MCM 2050.5

J2672 INJECTION, PROPANTHELINE BROMIDE

 W/D=1189 A/C=C CDV=D DCA
 MCM 2050.5

J2675 INJECTION, PROGESTERONE

 W/D=1189 A/C=F CDV=D DCA
 MCM 2050.5

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HCFA COMMON PROCEDURE CODING SYSTEM

J2680 INJECTION, FLUPHENAZINE DECANOATE, UP TO 25 MG

J2690 INJECTION, PROCAINAMIDE HCL, UP TO 1 GM

J2700 INJECTION, OXACILLIN SODIUM, UP TO 250 MG

J2710 INJECTION, NEOSTIGMINE METHYLSULFATE, UP TO 0.5 MG

J2720 INJECTION, PROTAMINE SULFATE, UP TO 5 ML

J2730 INJECTION, PRALIDOXIME CHLORIDE, UP TO 1 GM

J2740 INJECTION, PYRILGIN

J2750 INJECTION, RABIES VACCINE, PER DOSE

J2760 INJECTION, PHENTOLAMINE MESYLATE, UP TO 5 MG

J2765 INJECTION, METOCLOPRAMIDE HCL, UP TO 10 MG

J2770 INJECTION, RESERPINE, UP TO 5 MG

J2780 INJECTION, RESPIREX, UP TO 5 ML

J2790 INJECTION, RHO D IMMUNE GLOBULIN, HUMAN, ONE DOSE PACKAGE

J2800 INJECTION, METHOCARBAMOL, UP TO 10 ML

M/D=1189 A/C=C COV=D DCA
MCM 2050.5M/D=1189 A/C=C COV=D DCA
CIM F/D RI=I
MCM 2050.5M/D=1189 A/C=C COV=D DCA
ILC SP=B SA
CIM F/D RI=I
MCM 2050.5M/D=1189 A/C=C COV=D DCA
CIM F/D RI=I
MCM 2050.5M/D=1189 A/C=F COV=D DCA
MCM 2050.5M/D=1189 A/C=C COV=D DCA
CIM F/D RI=I
MCM 2050.5

M/D=1189 A/C=D COV DCA

M/D=1189 A/C=D COV DCA
XR1=90726 XR2 XR3
MCM 2050.5M/D=1189 A/C=C COV=D DCA
CIM F/D RI=I
MCM 2050.5M/D=1189 A/C=C COV=D DCA
MCM 2050.5M/D=1189 A/C=D COV DCA
MCM 2050.5

M/D=1189 A/C=D COV DCA

M/D=1189 A/C=C COV=D DCA
CIM F/D RI=I
MCM 2050.5M/D=1189 A/C=C COV=D DCA
CIM F/D RI=I
MCM 2050.5

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HCFA COMMON PROCEDURE CODING SYSTEM

J2810 INJECTION, THEOPHYLLINE, UP TO 2 ML

J2820 INJECTION, SANDRIL, UP TO 5 MG

J2825 INJECTION, SARRACENIA PURPUREA PLANT

J2830 INJECTION, SAVACORT-S, UP TO 1 ML

J2840 INJECTION, SAVACORT-50, UP TO 50 MG

J2850 INJECTION, SAVACORT-100, UP TO 100 MG

J2860 INJECTION, SECOBARBITAL SODIUM, UP TO 250 MG

J2870 INJECTION, SEMESTRIN, UP TO 2 MG

J2880 INJECTION, SERPASIL, UP TO 5 MG

J2890 INJECTION, SMALL POX (FOR TREATMENT ONLY).

J2900 INJECTION, SODASONE

J2910 INJECTION, AUROTHIOGLUCOSE, UP TO 50 MG

J2912 INJECTION, SODIUM CHLORIDE

J2914 INJECTION, SODIUM SALICYLATE

J2920 INJECTION, METHYLPREDNISOLONE SODIUM SUCCINATE, UP TO 40 MG

*	M/D=1189	A/C=C	COV=D	DCA
*	CIM		F/D	RI=I
*	MCM	2050.5		
*				
*	M/D=1189	A/C=D	COV=D	DCA
*	MCM	2050.5		
*				
*	M/D=1189	A/C=C	COV=D	DCA
*	MCM	2050.5		
*				
*	M/D=1189	A/C=D	COV	DCA
*	ILC			SP=P SA
*	CIM		F/D	RI=I
*				
*	M/D=1189	A/C=D	COV	DCA
*	ILC			SP=P SA
*				
*	M/D=1189	A/C=D	COV	DCA
*	ILC			SP=P SA
*				
*	M/D=1189	A/C=C	COV=D	DCA
*	CIM		F/D	RI=I
*	MCM	2050.5		
*				
*	M/D=1189	A/C=D	COV	DCA
*				
*	M/D=1189	A/C=D	COV	DCA
*				
*	M/D=1189	A/C=D	COV	DCA
*				
*				
*	M/D=1189	A/C=D	COV	DCA
*	ILC			SP=P SA
*	CIM		F/D	RI=I
*				
*	M/D=1189	A/C=C	COV=D	DCA
*	MCM	2050.5		
*				
*	M/D=1189	A/C=F	COV=D	DCA
*	MCM	2050.5		
*				
*	M/D=1189	A/C=F	COV=D	DCA
*	MCM	2050.5		
*				
*	M/D=1189	A/C=C	COV=D	DCA
*	ILC			SP=P SA
*	CIM		F/D	RI=I
*	MCM	2050.5		
*				

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J2930 INJECTION, METHYLPREDNISOLONE SODIUM SUCCINATE, UP TO 125 MG

J2940 INJECTION, SPANESTRIN P, UP TO 1 ML

J2950 INJECTION, PROMAZINE HCL, UP TO 25 MG

J2960 INJECTION, SPARTOCIN, UP TO 150 MG

J2970 INJECTION, METHICILLIN SODIUM, UP TO 1 GM

J2975 INJECTION, STAPHYLOCOCCUS TOXOID

J2980 INJECTION, TRIFLUOPERAZINE HCL, UP TO 2 MG

J2990 INJECTION, STERANE, UP TO 25 MG

J2995 INJECTION, STREPTOKINASE

J3000 INJECTION, STREPTOMYCIN, UP TO 1 GM

J3010 INJECTION, FENTANYL CITRATE, UP TO 2 ML

J3020 INJECTION, SUCOSTRIN, UP TO 20 MG

J3030 INJECTION, SUX-CERT, UP TO 1000 MG

J3040 INJECTION, SYMPTROL, UP TO 3 ML

HCFA COMMON PROCEDURE CODING SYSTEM

M/D=1189 A/C=C COV=D DCA
CIN F/D RI=I
NCM 2050.5

M/D=1189 A/C=D COV DCA

M/D=1189 A/C=C COV=D DCA
CIN F/D RI=I
NCM 2050.5

M/D=1189 A/C=D COV DCA

M/D=1189 A/C=C COV=D DCA
ILC SP=B SA
CIN F/D RI=I
NCM 2050.5

M/D=1189 A/C=D COV DCA

M/D=1189 A/C=D COV=D DCA
XR1=J3400 XR2 XR3
NCM 2050.5

M/D=1189 A/C=D COV=D DCA
XR1=J2640 XR2=J2650 XR3
ILC SP=P SA
CIN F/D RI=I
NCM 2050.5

M/D=1189 A/C=C COV=D DCA
NCM 2050.5

M/D=1189 A/C=F COV=D DCA
ILC SP=P SA
NCM 2050.5

M/D=1189 A/C=C COV=D DCA
CIN F/D RI=I
NCM 2050.5

M/D=1189 A/C=D COV DCA
XR1=J0330 XR2 XR3
CIN F/D RI=I

M/D=1189 A/C=D COV DCA
CIN F/D RI=I

M/D=1189 A/C=D COV DCA

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HCFA COMMON PROCEDURE CODING SYSTEM

J3050 INJECTION, DECAMETHONIUM BROMIDE, UP TO 2 MG

J3060 INJECTION, SYNKAYVITE, UP TO 10 MG

J3070 INJECTION, PENTAZOCINE HCL, UP TO 30 MG

J3080 INJECTION, CHLORPROTHIXENE, UP TO 50 MG

J3090 INJECTION, T-E IONATE-P.A., UP TO 2 ML

J3100 INJECTION, TERRAMYCIN, UP TO 50 MG

J3105 INJECTION, TERBUTALINE SULFATE, UP TO 1 MG

J3110 INJECTION, TESLAC, UP TO 100 MG

J3120 INJECTION, TESTOSTERONE ENANTHATE, UP TO 100 MG

J3130 INJECTION, TESTOSTERONE ENANTHATE, UP TO 200 MG

J3140 INJECTION, TESTOSTERONE SUSPENSION, UP TO 50 MG

J3150 INJECTION, TESTOSTERONE PROPIONATE, UP TO 100 MG

J3160 INJECTION, TESTROGEN, UP TO 2 ML

J3170 INJECTION, TESTATE, UP TO 1 ML.

J3180 INJECTION, TETANUS TOXOID, UP TO 1 ML

J3190 INJECTION, TETRACYN, UP TO 250 MG

M/D=1189 A/C=C COV=D DCA
 CIM F/D RI=I
 MCN 2050.5

M/D=1189 A/C=D COV DCA
 XR1=J3430 XR2 XR3
 CIM F/D RI=I

M/D=1189 A/C=C COV=D DCA
 ILC SP=D SA
 CIM F/D RI=I
 MCN 2050.5

M/D=1189 A/C=C COV=D DCA
 MCN 2050.5

M/D=1189 A/C=D COV DCA

M/D=1189 A/C=D COV DCA
 XR1=J2460 XR2 XR3
 ILC SP=B SA
 CIM F/D RI=I

M/D=1189 A/C=F COV=D DCA
 MCN 2050.5

M/D=1187 A/C=D COV DCA

M/D=1189 A/C=F COV=D DCA
 MCN 2050.5

M/D=1189 A/C=F COV=D DCA
 MCN 2050.5

M/D=1189 A/C=C COV=D DCA
 MCN 2050.5

M/D=1189 A/C=F COV=D DCA
 MCN 2050.5

M/D=1189 A/C=D COV DCA

M/D=1189 A/C=D COV DCA

M/D=1189 A/C=F COV=D DCA
 CIM F/D RI=I
 MCN 2050.5

M/D=1189 A/C=D COV DCA
 XR1=J0120 XR2 XR3
 ILC SP=B SA
 CIM F/D RI=I

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HCFA COMMON PROCEDURE CODING SYSTEM

J3200	INJECTION, THEELIN, UP TO 1 MG	M/D=1189 A/C=D COV DCA XR1=J1435 XR2 XR3
J3210	INJECTION, THIODYNE, UP TO 50 MG	M/D=1189 A/C=D COV DCA
J3220	INJECTION, THIOMERIN, UP TO 2 ML	M/D=1187 A/C=D COV DCA CIM F/D RI=I
J3230	INJECTION, CHLORPROMAZINE HCL, UP TO 50 MG	M/D=1189 A/C=C COV=D DCA CIM F/D RI=I MCM 2050.5
J3240	INJECTION, THYROTROPIN, UP TO 10 I.U.	M/D=1189 A/C=F COV=D DCA MCM 2050.5
J3250	INJECTION, TRIMETHOGENZAMIDE HCL, UP TO 200 MG	M/D=1189 A/C=C COV=D DCA MCM 2050.5
J3260	INJECTION, TOBRAMYCIN SULFATE, UP TO 80 MG	M/D=1189 A/C=C COV=D DCA ILC SP=D SA MCM 2050.5
J3270	INJECTION, IMIPRAMINE HCL, UP TO 25 MG	M/D=1189 A/C=C COV=D DCA MCM 2050.5
J3280	INJECTION, THIETHYLPERAZINE MALEATE, UP TO 10 MG	M/D=1189 A/C=C COV=D DCA CIM F/D RI=I MCM 2050.5
J3290	INJECTION, TOTACILLIN-N, UP TO 500 MG	M/D=1189 A/C=D COV DCA XR1=J0290 XR2 XR3 ILC SP=B SA
J3300	INJECTION, TRIAMCINOLONE ACETONIDE, DIACETATE HEXACETONIDE, UP TO 40MG	M/D=1189 A/C=C COV=D DCA ILC SP=P SA MCM 2050.5
J3310	INJECTION, PERPHENAZINE, UP TO 5 MG	M/D=1189 A/C=C COV=D DCA CIM F/D RI=I MCM 2050.5
J3320	INJECTION, SPECTINOMYCIN DIHYDROCHLORIDE, UP TO 2 GM	M/D=1189 A/C=C COV=D DCA ILC SP=P SA MCM 2050.5
J3330	INJECTION, ULACORT	M/D=1189 A/C=D COV DCA ILC SP=P SA
J3340	INJECTION, CRYPTENAMINE ACETATE, UP TO 2 ML	M/D=1189 A/C=C COV=D DCA CIM F/D RI=I MCM 2050.5

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HCFA COMMON PROCEDURE CODING SYSTEM

J3350 INJECTION, UREA, UP TO 40 GM

J3355 INJECTION, URESTRIN

J3360 INJECTION, DIAZEPAM, UP TO 5 MG

J3370 INJECTION, VANCOMYCIN HCL, UP TO 500 MG

J3380 INJECTION, ISOXUPRINE HCL, UP TO 10 MG

J3390 INJECTION, METHOXAMINE, UP TO 20 MG

J3400 INJECTION, TRIFLUPROMAZINE HCL, UP TO 20 MG

J3410 INJECTION, HYDROXYZINE HCL, UP TO 25 MG

J3420 INJECTION, VITAMIN B-12 CYANOCOBALAMIN, UP TO 1000 MCG

J3430 INJECTION, VITAMIN K, PHYTONADIONE, MENADIONE, MENADIOL SODIUM DIPHOSPHATE

J3440 INJECTION, VONTROL, UP TO 40 MG

J3450 INJECTION, MEPHENTERMINE SULFATE, UP TO 30 MG

J3460 INJECTION, WYICILLIN, UP TO 600,000 UNITS

M/D=1189	A/C=C	COV=D	DCA
CIM		F/D	RI=I
MCM	2050.5		
M/D=1189	A/C=D	COV	DCA
M/D=1189	A/C=C	COV=D	DCA
ILC			SP=D SA
CIM		F/D	RI=I
MCM	2050.5		
M/D=1189	A/C=C	COV=D	DCA
ILC			SP=P SA
CIM		F/D	RI=I
MCM	2050.5		
M/D=1189	A/C=C	COV=D	DCA
MCM	2050.5		
M/D=1189	A/C=C	COV=D	DCA
CIM		F/D	RI=I
MCM	2050.5		
M/D=1189	A/C=C	COV=D	DCA
ILC			SP=B SA
MCM	2050.5		
M/D=1189	A/C=C	COV=D	DCA
CIM		F/D	RI=I
MCM	2050.5		
M/D=1189	A/C=C	COV=D	DCA
CIM		F/D	RI=I
MCM	2050.5		
M/D=1189	A/C=D	COV	DCA
XR1=J2510	XR2		XR3
ILC			SP=B SA

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HCFA COMMON PROCEDURE CODING SYSTEM

J3470 INJECTION, HYALURONIDASE, UP TO 150 UNITS

J3480 INJECTION, XYLOCAINE

J3490 UNCLASSIFIED DRUGS

J3500 VITAMIN THERAPY

J3510 CELLULAR THERAPY

J3520 ENDRATE ETHYLENEDIAMINE-TETRA-ACETIC ACID (EDTA)

J3530 NASAL VACCINE INHALATION

J3540 AUTOGENOUS BLOOD EXTRACT, INTRAVENOUS OR INTRAMUSCULAR
INJECTIONS

J3550 INTRA-ARTERIAL OXYGEN INJECTION

J3560 ADRENAL CORTEX EXTRACT

J3570 LAETRILE, AMYGDALIN, VITAMIN B17

IMMUNIZATION INJECTIONS

J6015 TYPHUS

J6025 CHOLERA

J6045 SMALLPOX

M/D=1189 A/C=C COV=D DCA
MCM 2050.5M/D=1189 A/C=D COV DCA
XR1=J2000 XR2 XR3
ILC SP=P SAM/D=1189 A/C=F COV=D DCA
MCM 2050.5M/D=1189 A/C=F COV=D DCA
MCM 2050.5M/D=1189 A/C=D COV=M DCA
XR1=M0075 XR2 XR3
CIM=35-5 F/D RI
MCM 2050.5M/D=1189 A/C=F COV=M DCA
XR4 XR5 IC=S SLHA
CIM=35-64 F/D RI
MCM 2050.5M/D=1189 A/C=F COV=D DCA
MCM 2050.5M/D=1189 A/C=F COV=D DCA
MCM 2050.5M/D=1189 A/C=F COV=D DCA
MCM 2050.5M/D=1189 A/C=F COV=D DCA
MCM 2050.5M/D=1189 A/C=F COV=M DCA
CIM=45-10 F/D RI
MCM 2050.5

M/D= 986 A/C=E DCA

M/D=1189 A/C=F COV=S DCA
MCM 2050.5M/D=1189 A/C=D COV=S DCA
XR1=90725 XR2 XR3

M/D=1189 A/C=D COV=S DCA

MISCELLANEOUS DRUGS AND SOLUTIONS

J7000	VIAL OF ALLERGY VACCINE	M/D=1189 A/C=D COV DCA XR1=J7010 XR2=J7020 XRS
J7010	VIAL OF ALLERGY VACCINE, SINGLE DOSE	M/D=1189 A/C=F COV=D DCA NCM 2005.2
J7020	VIAL OF ALLERGY VACCINE, MULTIPLE DOSE, COST PER DOSE	M/D=1189 A/C=F COV=D DCA NCM 2005.2
J7030	INFUSION, NORMAL SALINE SOLUTION , 1000 CC	M/D=1189 A/C=F COV=D DCA CIM F/D RI=I NCM 2050.5
J7040	INFUSION, NORMAL SALINE SOLUTION, STERILE (500 ML=1 UNIT)	M/D=1189 A/C=F COV=D DCA CIM F/D RI=I NCM 2050.5
J7042	5% DEXTROSE/NORMAL SALINE (500 ML = 1 UNIT)	M/D=1189 A/C=F COV=D DCA NCM 2050.5
J7050	INFUSION, NORMAL SALINE SOLUTION , 250 CC	M/D=1189 A/C=F COV=D DCA CIM F/D RI=I NCM 2050.5
J7060	5% DEXTROSE/WATER (500 ML = 1 UNIT)	M/D=1189 A/C=F COV=D DCA ILC SP=D SA CIM F/D RI=I NCM 2050.5
J7070	INFUSION, D5W, 1000 CC	M/D=1189 A/C=F COV=D DCA ILC SP=D SA CIM F/D RI=I NCM 2050.5
J7080	INFUSION, ALBUMISOL 5%, 500 ML VIAL	M/D=1189 A/C=F COV=D DCA CIM F/D RI=I NCM 2050.5
J7090	INFUSION, ALBUMISOL 25%, 50 ML VIAL	M/D=1189 A/C=F COV=D DCA CIM F/D RI=I NCM 2050.5
J7100	INFUSION, DEXTRAN 40, 500 ML	M/D=1189 A/C=F COV=D DCA CIM F/D RI=I NCM 2050.5
J7110	INFUSION, DEXTRAN 75, 500 ML	M/D=1189 A/C=F COV=D DCA CIM F/D RI=I NCM 2050.5

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HCFA COMMON PROCEDURE CODING SYSTEM

J7120 RINGERS LACTATE INFUSION, UP TO 1000 CC

J7190 HYPERTONIC SALINE SOLUTION, 50 OR 100 MEQ, 20 CC VIAL

J7140 PRESCRIPTION DRUG, ORAL, DISPENSED IN PHYSICIAN'S OFFICE

J7150 PRESCRIPTION DRUG, ORAL CHEMOTHERAPY FOR MALIGNANT DISEASE

J7160 PRESCRIPTION, LEGEND, DRUG APPETITE DEPRESSANT

J7170 PRESCRIPTION, LEGEND, DRUG, CONTRACEPTIVES

J7180 PRESCRIPTION, LEGEND, DRUG, FOR MENTAL OR NERVOUS CONDITION

J7190 FACTOR VIII, VIRAL INACTIVATED, PER UNIT

J7191 HEMOPHILIC NON HEAT TREATED FACTOR VIII

J7194 FACTOR IX, COMPLEX, HEAT-TREATED, PER UNIT

J7195 HEMOPHILIC NON HEAT TREATED FACTOR IX

STINGING INSECT VENOMS

J7300 HONEY BEE VENOM

J7310 YELLOW JACKET VENOM PROTEIN

J7320 YELLOW HORNET VENOM PROTEIN

J7330 WHITE-FACED (BALD-FACED) HORNET VENOM PROTEIN

*	M/D=1189 A/C=C	COV=D	DCA
*	CIM	F/D	RI=I
*	MCM 2050.5		
*	M/D=1189 A/C=F	COV=D	DCA
*	CIM	F/D	RI=I
*	MCM 2050.5		
*	M/D=1189 A/C=F	COV=S	DCA
*	XR4	XR5	IC=R SLHA
*	MCM 2050.5		
*	M/D=1189 A/C=F	COV=S	DCA
*	MCM 2050.5		
*	M/D=1189 A/C=D	COV=D	DCA
*	CIM=35-26	F/D	RI
*	M/D=1189 A/C=D	COV	DCA
*	M/D=1189 A/C=D	COV	DCA
*	M/D=1189 A/C=D	COV	DCA
*	M/D=1189 A/C=F	COV=D	DCA
*	MCM 2050.5		
*	M/D=1187 A/C=D	COV	DCA
*	M/D=1189 A/C=F	COV=D	DCA
*	MCM 2050.5		
*	M/D=1187 A/C=D	COV	DCA
*	M/D=1189 A/C=D	COV	DCA
*	XR1=95130 XR2		XR3
*	MCM 2050.5		
*	M/D=1189 A/C=D	COV	DCA
*	XR1=95130 XR2		XR3
*	MCM 2050.5		
*	M/D=1189 A/C=D	COV	DCA
*	XR1=95130 XR2		XR3
*	MCM 2050.5		
*	M/D=1189 A/C=D	COV	DCA
*	XR1=95130 XR2		XR3
*	MCM 2050.5		

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HCFA COMMON PROCEDURE CODING SYSTEM

J7340 MIXED VESPID VENOM PROTEIN

J7350 WASP VENOM PROTEIN

IMMUNOSUPPRESSIVE DRUGS (INCLUDES NON-INJECTIBLES)

J7500 AZATHIOPRINE - ORAL, TAB, 50 MG, 100S EA

J7501 AZATHIOPRINE - PARENTERAL, VIAL, 100 MG., 20 ML EA

J7502 CYCLOSPORINE - ORAL, SOL; 100 MG/ML, 50 ML, EA

J7503 CYCLOSPORINE - PARENTERAL, AMP, IV, 250 MG, 5 ML, 10S EA UD

J7504 LYMPHOCYTE IMMUNE GLOBULIN, ANTITUMOR GLOBULIN - PARENTERAL, AMP, 50MG/ML,
5 ML EA

J7505 MONOCLONAL ANTIBODIES - PARENTERAL, AMP, 5 MG/5ML, 5ML EA

J7506 PREDNISONE, ANY DOSAGE, 100 TABLETS

M/D=1189 A/C=D COV DCA
XR1=95130 XR2=THRU XR3=95134
MCM 2050.5M/D=1189 A/C=D COV DCA
XR1=95130 XR2 XR3
MCM 2050.5

M/D=1188 A/C=A DCA

M/D=1188 A/C=C COV=D DCA
MCM 2050.5M/D=1188 A/C=C COV=D DCA
MCM 2050.5M/D=1188 A/C=C COV=D DCA
MCM 2050.5M/D=1188 A/C=C COV=D DCA
MCM 2050.5M/D=1188 A/C=C COV=D DCA
MCM 2050.5M/D=1187 A/C=C COV=D DCA
MCM 2050.5M/D=1188 A/C=A COV=D DCA
MCM 2050.5

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HCFA COMMON PROCEDURE CODING SYSTEM

CHEMOTHERAPY DRUGS J9000 - J9999
 THE COST OF THE CHEMOTHERAPY DRUG ONLY,
 NOT TO INCLUDE THE ADMINISTRATION

J9000 DOXORUBICIN HCL, 10 MG VIAL

J9010 DOXORUBICIN HCL, 50 MG VIAL

J9020 ASPARAGINASE, UP TO 10,000 UNITS

J9030 BACILLE CALMETTE GUERIN, BCG

J9040 BLEOMYCIN SULFATE, 15 UNIT AMPULE

J9045 INJECTION, CARBOPLATIN, PER 50 MG.

J9050 CARMUSTINE, BISCHLORETHYL NITROSOUREA, 8CNU, 100 MG VIAL

J9060 CISPLATIN, 10 MG VIAL

J9062 CISPLATIN, 50 MG VIAL

J9070 CYCLOPHOSPHAMIDE, 10 CC DR 100 MG

J9080 CYCLOPHOSPHAMIDE, 20 CC DR 200 MG

J9090 CYCLOPHOSPHAMIDE, 30 CC DR 500 MG

J9091 CYCLOPHOSPHAMIDE, 1.0 GRAM

J9092 CYCLOPHOSPHAMIDE, 2.0 GRAM

J9093 CYCLOPHOSPHAMIDE, LYOPHILIZED, 100 MG

M/D=1189 A/C=C COV=D DCA
 MCM 2050.5

M/D=1189 A/C=C COV=D DCA
 MCM 2050.5

M/D=1189 A/C=F COV=D DCA
 MCM 2050.5

M/D=1187 A/C=D COV DCA
 XR1=90728 XR2 XRS

M/D=1189 A/C=C COV=D DCA
 MCM 2050.5

M/D=1189 A/C=A COV=D DCA=90
 MCM 2050.5

M/D=1189 A/C=F COV=D DCA
 MCM 2050.5

M/D=1189 A/C=C COV=D DCA
 MCM 2050.5

M/D=1189 A/C=C COV=D DCA
 MCM 2050.5

M/D=1189 A/C=C COV=D DCA
 MCM 2050.5

M/D=1189 A/C=C COV=D DCA
 MCM 2050.5

M/D=1189 A/C=C COV=D DCA
 MCM 2050.5

M/D=1189 A/C=C COV=D DCA
 MCM 2050.5

M/D=1189 A/C=C COV=D DCA
 MCM 2050.5

M/D=1189 A/C=C COV=D DCA
 MCM 2050.5

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HCFA COMMON PROCEDURE CODING SYSTEM

J9094 CYCLOPHOSPHAMIDE, LYOPHILIZED, 200 MG

J9095 CYCLOPHOSPHAMIDE, LYOPHILIZED, 500 MG

J9096 CYCLOPHOSPHAMIDE, LYOPHILIZED, 1.0 GRAM

J9097 CYCLOPHOSPHAMIDE, LYOPHILIZED, 2.0 GRAM

J9100 CYTARABINE HCL, 100 MG

J9110 CYTARABINE HCL, 500 MG

J9120 DACTINOMYCIN, ACTINOMYCIN D, 3CC/0.5 MG

J9130 DACARBAZINE, 10 MG/ML (100 MG VIAL)

J9140 DACARBAZINE, 10 MG/ML (200 MG VIAL)

J9150 DAUNORUBICIN, HCL

J9160 DELAUTIN, 1CC, 250 MG/M

J9162 DEPO-PROVERA AQ., UP TO 1000 MG/M

J9165 INJECTION, DIETHYLSTILBESTROL DIPHOSPHATE, PER 250 MG

J9170 DROMOSTANOLONE, PROPIONATE, 5 MG/10 ML

J9180 ESTRADURIN, 40 MG/2 ML

J9181 ETOPOSIDE, UP TO 50 MG.

J9182 ETOPOSIDE, UP TO 100 MG.

M/D=1189	A/C=C	COV=D	DCA
MCM	2050.5		
M/D=1189	A/C=C	COV=D	DCA
MCM	2050.5		
M/D=1189	A/C=C	COV=D	DCA
MCM	2050.5		
M/D=1189	A/C=C	COV=D	DCA
MCM	2050.5		
M/D=1189	A/C=C	COV=D	DCA
MCM	2050.5		
M/D=1189	A/C=C	COV=D	DCA
MCM	2050.5		
M/D=1189	A/C=C	COV=D	DCA
MCM	2050.5		
M/D=1189	A/C=F	COV=D	DCA
MCM	2050.5		
M/D=1189	A/C=F	COV=D	DCA
MCM	2050.5		
M/D=1189	A/C=C	COV=D	DCA
MCM	2050.5		
M/D=1187	A/C=D	COV	DCA
CIM	F/D		RI=I
M/D=1189	A/C=D	COV	DCA
XR1=J9240	XR2		XR3
M/D=1189	A/C=C	COV=D	DCA
MCM	2050.5		
M/D=1189	A/C=C	COV=D	DCA
MCM	2050.5		
M/D=1187	A/C=D	COV	DCA
XR1=J9295	XR2		XR3
M/D=1189	A/C=F	COV=D	DCA
MCM	2050.5		
M/D=1189	A/C=F	COV=D	DCA
MCM	2050.5		

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HCFA COMMON PROCEDURE CODING SYSTEM

J9190 FLUOROURACIL, 500 MG/ML AMP

J9200 FLOXURIDINE, 500 MG

J9208 INJECTION, IFOSFOMIDE, PER GM.

J9209 INJECTION, MESNA, PER 200 MG.

J9210 HEXAMETHYLMELAMINE

J9212 INTERFERON, 3 MILLION IU VIAL

J9218 LEUPROLIDE ACETATE, PER 1 MG

J9219 LAETRILE

J9220 LOMUSTINE, CYCLOHEXYL, CHLOROETHYL NITROSUREA,
AVAILABLE IN CAPSULE ONLY

J9230 MECHLORETHAMINE HCL, (NITROGEN MUSTARD), HN2, 20 CC OR 10 MG

J9240 MEDROXYPROGESTERONE ACETATE, 400 MG/ML

J9250 METHOTREXATE SODIUM MIX, 2 CC OR 5 MG

J9260 METHOTREXATE SODIUM MIX, 2 CC OR 50 MG

J9270 PLICAMYCIN (NITHRAMYCIN), 2500 MCG

J9280 MITOMYCIN, 5 MG

J9290 MITOMYCIN, 20 MG

M/D=1189 A/C=C COV=D DCA
MCM 2050.5M/D=1189 A/C=C COV=D DCA
MCM 2050.5M/D=1189 A/C=A COV=D DCA=90
MCM 2050.5M/D=1189 A/C=A COV=D DCA=90
MCM 2050.5M/D=1189 A/C=D COV=D DCA
MCM 2050.5M/D=1189 A/C=F COV=D DCA
MCM 2050.5M/D=1189 A/C=A COV=D DCA=90
MCM 2050.5M/D=1189 A/C=D COV=M DCA
CIN=45-10 F/D RI
MCM 2050.5M/D=1189 A/C=D COV=S DCA
MCM 2050.5M/D=1189 A/C=C COV=D DCA
MCM 2050.5M/D=1189 A/C=C COV=D DCA
MCM 2050.5M/D=1189 A/C=F COV=D DCA
MCM 2050.5M/D=1189 A/C=F COV=D DCA
MCM 2050.5M/D=1189 A/C=C COV=D DCA
MCM 2050.5M/D=1189 A/C=F COV=D DCA
MCM 2050.5M/D=1189 A/C=F COV=D DCA
MCM 2050.5

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HCFA COMMON PROCEDURE CODING SYSTEM

J9291 MITOMYCIN, 40 MG

J9293 INJECTION, MITOXANTHONE HCL, PER 5 MG

J9295 POLYESTRADIOL PHOSPHATE 40 MG

J9300 QUINACRINE HCL, 10 CC/200 MG/M

J9310 STILPHOSTROL, 0.25 GM/5 ML

J9320 STREPTOZOCIN

J9330 TESTLACTONE, TESLAC, 250 MG/M

J9340 THIOTEPA, 15 MG/M

J9360 VINBLASTINE SULFATE, 10 MG

J9370 VINCISTINE SULFATE, 1 MG/1 ML (1 ML VIAL)

J9375 VINCISTINE SULFATE 2 MG/2 ML (2 ML VIAL)

J9380 VINCISTINE SULFATE, 5 MG/5 ML (5 ML VIAL)

J9381 CEFTRIAXONE SODIUM, UP TO 1 GM

J9999 NOT OTHERWISE CLASSIFIED, ANTINEOPLASTIC DRUGS

* N/D=1189 A/C=F COV=D DCA
* MCM 2050.5

* N/D=1189 A/C=A COV=D DCA=90
* MCM 2050.5

* N/D=1189 A/C=F COV=D DCA
* MCM 2050.5

* N/D=1189 A/C=C COV=D DCA
* MCM 2050.5

* N/D=1187 A/C=D COV DCA
* XR1=J9165 XR2 XR3

* N/D=1189 A/C=F COV=D DCA
* MCM 2050.5

* N/D=1187 A/C=D COV DCA
* MCM 2050.5

* N/D=1189 A/C=C COV=D DCA
* MCM 2050.5

* N/D=1189 A/C=F COV=D DCA
* MCM 2050.5

* N/D=1189 A/C=F COV=D DCA
* MCM 2050.5

* N/D=1189 A/C=F COV=D DCA
* MCM 2050.5

* N/D=1189 A/C=D COV DCA
* XR1=J0696 XR2 XR3
* MCM 2050.5

* N/D=1189 A/C=F COV=D DCA
* MCM 2050.5

ORTHOTIC PROCEDURES - L0100-L4999

ORTHOTIC DEVICES - SPINAL - L0100 - L0999

SPINAL - CERVICAL - L0100-L0209

L0100 CERVICAL, CRANIOTENSORS, HELMET MOLDED TO PATIENT MODEL

L0110 CERVICAL, CRANIOTENSORS, HELMET, NON-MOLDED

L0120 CERVICAL, FLEXIBLE, NON-ADJUSTABLE (FOAM COLLAR)

L0130 CERVICAL, FLEXIBLE, THERMOPLASTIC COLLAR, MOLDED TO PATIENT

L0140 CERVICAL, SEMI-RIGID, ADJUSTABLE (PLASTIC COLLAR)

L0150 CERVICAL, SEMI-RIGID, ADJUSTABLE MOLDED CHIN CUP (PLASTIC COLLAR
WITH MANDIBULAR/OCCIPITAL PIECE)

L0160 CERVICAL, SEMI-RIGID, WIRE FRAME OCCIPITAL/MANDIBULAR SUPPORT

L0170 CERVICAL, COLLAR, MOLDED TO PATIENT MODEL

L0172 CERVICAL, COLLAR, SEMI-RIGID THERMOPLASTIC FOAM, TWO PIECE

L0174 CERVICAL, COLLAR, SEMI-RIGID, THERMOPLASTIC FOAM, TWO PIECE WITH THORACIC
EXTENSION

MULTIPLE POST COLLAR

L0180 CERVICAL, MULTIPLE POST COLLAR, OCCIPITAL/MANDIBULAR SUPPORTS,
ADJUSTABLEL0190 CERVICAL, MULTIPLE POST COLLAR, OCCIPITAL/MANDIBULAR SUPPORTS,
ADJUSTABLE CERVICAL BARS (SDMI, GUILFORD, TAYLOR TYPES)L0200 CERVICAL, MULTIPLE POST COLLAR, OCCIPITAL/MANDIBULAR SUPPORTS,
ADJUSTABLE CERVICAL BARS, AND THORACIC EXTENSION

SPINAL - THORACIC - L0210-L0299

M/D=1181 A/C COV DCA

M/D=1181 A/C COV DCA

M/D=1181 A/C COV DCA

M/D=1185 A/C=C COV DCA

M/D=1181 A/C COV DCA

M/D=1181 A/C COV DCA

M/D=1181 A/C COV DCA

M/D=1181 A/C=C COV DCA

M/D=1187 A/C=A COV DCA

M/D=1187 A/C=A COV DCA

M/D=1187 A/C=A COV DCA

M/D=1187 A/C=A DCA

M/D=1185 A/C=C COV DCA

M/D=1181 A/C COV DCA

M/D=1181 A/C COV DCA

M/D=1185 A/C=C COV DCA

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L0210	THORACIC, RIB BELT, CUSTOM FITTED	M/D=1181	A/C	COV	DCA
L0220	THORACIC, RIB BELT, CUSTOM FABRICATED	M/D=1181	A/C	COV	DCA
SPINAL - THORACIC - LUMBAR - SACRAL - L0300-L0499					
FLEXIBLE					
L0300	THORACIC-LUMBAR-SACRAL-ORTHOSIS (TLSO), FLEXIBLE (DORSO-LUMBAR SURGICAL SUPPORT), CUSTOM FITTED	M/D=1187	A/C=E	COV	DCA
L0310	TLSO, FLEXIBLE, (DORSO-LUMBAR SURGICAL SUPPORT), CUSTOM FABRICATED	M/D=1181	A/C	COV	DCA
L0315	TLSO, FLEXIBLE DORSO-LUMBAR SURGICAL SUPPORT, ELASTIC TYPE, WITH RIGID POSTERIOR PANEL	M/D=1188	A/C=A	COV	DCA
L0317	TLSO, FLEXIBLE DORSO-LUMBAR SURGICAL SUPPORT, HYPEREXTENSION, ELASTIC TYPE, WITH RIGID POSTERIOR PANEL	M/D=1188	A/C=A	COV	DCA
ANTERIOR-POSTERIOR CONTROL					
L0320	TLSO, ANTERIOR-POSTERIOR CONTROL (TAYLOR TYPE), WITH APRON FRONT	M/D=1187	A/C=E	COV	DCA
L0330	TLSO, ANTERIOR-POSTERIOR-LATERAL CONTROL (KNIGHT-TAYLOR TYPE), WITH APRON FRONT	M/D=1181	A/C	COV	DCA
ANTERIOR-POSTERIOR-LATERAL-ROTARY CONTROL					
L0340	TLSO, ANTERIOR-POSTERIOR-LATERAL-ROTARY CONTROL (ARNOLD, MAGNUSON, STEINDLER TYPES), WITH APRON FRONT	M/D=1185	A/C=C	COV	DCA
L0350	TLSO, ANTERIOR-POSTERIOR-LATERAL-ROTARY CONTROL, FLEXION COMPRESSION JACKET, CUSTOM FITTED	M/D=1184	A/C	COV	DCA
L0360	TLSO, ANTERIOR-POSTERIOR-LATERAL-ROTARY CONTROL, FLEXION COMPRESSION JACKET MOLDED TO PATIENT MODEL	M/D=1184	A/C	COV	DCA
L0370	TLSO, ANTERIOR-POSTERIOR-LATERAL-ROTARY CONTROL, HYPEREXTENSION (JEWETT, LENNIX, BAKER, CASH TYPES)	M/D=1184	A/C	COV	DCA
L0380	TLSO, ANTERIOR-POSTERIOR-LATERAL-ROTARY CONTROL, WITH EXTENSIONS	M/D=1188	A/C=C	COV	DCA
L0390	TLSO, ANTERIOR-POSTERIOR-LATERAL CONTROL (BODY JACKET) MOLDED TO PATIENT MODEL	M/D=1185	A/C=C	COV	DCA
L0400	TLSO, ANTERIOR-POSTERIOR-LATERAL CONTROL (BODY JACKET) MOLDED TO PATIENT MODEL, WITH INTERFACE MATERIAL	M/D=1187	A/C=E	COV	DCA

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L0410	TLSD, ANTERIOR-POSTERIOR-LATERAL CONTROL (BODY JACKET), TWO-PIECE CONSTRUCTION, MOLDED TO PATIENT MODEL	*	M/D=1187 A/C=A COV	DCA
L0420	TLSD, ANTERIOR-POSTERIOR-LATERAL CONTROL (BODY JACKET), TWO PIECE CONSTRUCTION, MOLDED TO PATIENT MODEL, WITH INTERFACE MATERIAL	*	M/D=1187 A/C=A COV	DCA
L0430	TLSD, ANTERIOR-POSTERIOR-LATERAL CONTROL (BODY JACKET), WITH INTERFACE MATERIAL CUSTOM FITTED	*	M/D=1187 A/C=A COV	DCA
L0440	TLSD, ANTERIOR-POSTERIOR-LATERAL CONTROL (BODY JACKET), WITH OVERLAPPING FRONT SECTION, SPRING STEEL FRONT, CUSTOM FITTED	*	M/D=1187 A/C=A COV	DCA
SPINAL - LUMBAR - SACRAL - L0500-L0599		*	M/D=1187 A/C=A	DCA
FLEXIBLE		*	M/D=1187 A/C=A	DCA
L0500	LUMBAR-SACRAL-ORTHOSIS (LSO), FLEXIBLE, (LUMBO-SACRAL SURGICAL SUPPORT), CUSTOM FITTED	*	M/D=1187 A/C=E COV	DCA
L0510	LSO, FLEXIBLE (LUMBO-SACRAL SURGICAL SUPPORT), CUSTOM FABRICATED	*	M/D=1181 A/C	COV DCA
L0515	LSO, FLEXIBLE, LUMBO-SACRAL SURGICAL SUPPORT ELASTIC TYPE, WITH RIGID POSTERIOR PANEL	*	M/D=1187 A/C=A COV	DCA
ANTERIOR-POSTERIOR-LATERAL CONTROL		*		
L0520	LSO, ANTERIOR-POSTERIOR-LATERAL CONTROL (KNIGHT, WILCOX TYPES), WITH APRON FRONT	*	M/D=1184 A/C	COV DCA
ANTERIOR-POSTERIOR CONTROL		*		
L0530	LSO, ANTERIOR-POSTERIOR CONTROL (MACAUSLAND TYPE), WITH APRON FRONT	*	M/D=1185 A/C=C COV	DCA
LUMBAR FLEXION		*		
L0540	LSO, LUMBAR FLEXION (WILLIAMS FLEXION TYPE) ANTERIOR-POSTERIOR-LATERAL CONTROL (BODY JACKET)	*	M/D=1184 A/C	COV DCA
L0550	LSO, ANTERIOR-POSTERIOR-LATERAL CONTROL (BODY JACKET), MOLDED TO PATIENT MODEL	*	M/D=1185 A/C=C COV	DCA
L0560	LSO, ANTERIOR-POSTERIOR LATERAL CONTROL (BODY JACKET), MOLDED TO PATIENT MODEL, WITH INTERFACE MATERIAL	*	M/D=1187 A/C=E COV	DCA
L0565	LSO, ANTERIOR-POSTERIOR-LATERAL CONTROL (BODY JACKET), CUSTOM FITTED	*	M/D=1187 A/C=A COV	DCA

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HCFA COMMON PROCEDURE CODING SYSTEM

SPINAL - SACROILIAC - L0600-L0699
FLEXIBLE

L0600 SACROILIAC, FLEXIBLE (SACROILIAC SURGICAL SUPPORT), CUSTOM FITTED

L0610 SACROILIAC, FLEXIBLE (SACROILIAC SURGICAL SUPPORT), CUSTOM
FABRICATED

SEMI-RIGID

L0620 SACROILIAC, SEMI-RIGID (GOLDTHWAITE, OSGOOD TYPES), WITH
APRON FRONT

SPINAL-CERVICAL-THORACIC-LUMBAR-SACRAL-HALO
PROCEDURE-L0700-L0899

ANTERIOR-POSTERIOR-LATERAL CONTROL

L0700 CERVICAL-THORACIC-LUMBAR-SACRAL-ORTHOSES (CTLSSO),
ANTERIOR-POSTERIOR-LATERAL CONTROL, MOLDED TO PATIENT
MODEL, (MINERVA TYPE)

L0710 CTLSSO, ANTERIOR-POSTERIOR-LATERAL-CONTROL, MOLDED TO
PATIENT MODEL, WITH INTERFACE MATERIAL, (MINERVA TYPE)

HALO PROCEDURE

L0800 HALO PROCEDURES, CERVICAL HALO WITH PELVIC FIXATION, (DEWALD
TYPE PROCEDURE)

L0810 HALO PROCEDURE, CERVICAL HALO INCORPORATED INTO JACKET
VEST

L0820 HALO PROCEDURE, CERVICAL HALO INCORPORATED INTO PLASTER BODY
JACKET

L0830 HALO PROCEDURE, CERVICAL HALO INCORPORATED INTO MILWAUKEE TYPE
ORTHOSIS

L0860 ADDITION TO HALO PROCEDURES, MAGNETIC REASONANCE IMAGE COMPATIBLE SYSTEM

SPINAL - TORSO SUPPORTS - L0900-L0999

PTOSIS SUPPORTS

L0900 TORSO SUPPORT, PTOSIS SUPPORT, CUSTOM FITTED

M/D=1181 A/C COV DCA

M/D=1181 A/C COV DCA

M/D=1181 A/C COV DCA

M/D=1187 A/C C DCA

M/D=1185 A/C=C COV DCA

M/D=1185 A/C=C COV DCA

M/D=1187 A/C=C DCA

M/D=1187 A/C=D COV DCA

M/D=1187 A/C=C COV DCA

M/D=1187 A/C=E COV DCA

M/D=1187 A/C=E COV DCA

M/D=1188 A/C=A COV DCA

M/D=1187 A/C=E COV DCA

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HCFA COMMON PROCEDURE CODING SYSTEM

L0910 TORSO SUPPORT, PTOSIS SUPPORT, CUSTOM FABRICATED
PENDULOUS ABDOMEN SUPPORTS

L0920 TORSO SUPPORT, PENDULOUS ABDOMEN SUPPORT, CUSTOM FITTED

L0930 TORSO SUPPORT, PENDULOUS ABDOMEN SUPPORT, CUSTOM
FABRICATED

POST SURGICAL SUPPORTS

L0940 TORSO SUPPORT, POST SURGICAL SUPPORT, CUSTOM FITTED

L0950 TORSO SUPPORT, POST SURGICAL SUPPORT, CUSTOM FABRICATED

L0960 TORSO SUPPORT, POST SURGICAL SUPPORT, PADS FOR POST
SURGICAL SUPPORT

ADDITIONS TO SPINAL ORTHOSES - L0970-L0999

L0970 TLSO, CORSET FRONT

L0972 LSO, CORSET FRONT

L0974 TLSO, FULL CORSET

L0976 LSO, FULL CORSET

L0978 AXILLARY CRUTCH EXTENSION

L0980 PERONEAL STRAPS, PAIR

L0982 STOCKING SUPPORTER GRIPS, SET OF FOUR (4)

M/D=1187 A/C=E COV DCA

M/D=1187 A/C=E COV DCA

M/D=1187 A/C=E COV DCA

M/D=1187 A/C=E COV DCA

M/D=1187 A/C=E COV DCA

M/D=1187 A/C=E COV DCA

M/D=1181 A/C COV DCA

M/D=1181 A/C COV DCA

M/D=1181 A/C COV DCA

M/D=1181 A/C COV DCA

M/D=1181 A/C COV DCA

M/D=1187 A/C=C COV DCA

M/D=1181 A/C COV DCA

ORTHOTIC DEVICES - SCOLIOSIS PROCEDURES - L1000-L1499

NOTE: SCOLIOSIS PROCEDURES

THE ORTHOTIC CARE OF SCOLIOSIS DIFFERS FROM OTHER ORTHOTIC CARE IN THAT THE TREATMENT IS MORE DYNAMIC IN NATURE AND UTILIZES ONGOING, CONTINUAL MODIFICATION OF THE ORTHOSIS TO THE PATIENT'S CHANGING CONDITION.

THIS CODING STRUCTURE USES THE PROPER NAMES--OR EPONYMS--OF THE PROCEDURES BECAUSE THEY HAVE HISTORIC AND UNIVERSAL ACCEPTANCE IN THE PROFESSION. IT SHOULD BE RECOGNIZED THAT VARIATIONS TO THE BASIC PROCEDURES DESCRIBED BY THE FOUNDERS/DEVELOPERS ARE ACCEPTED IN VARIOUS MEDICAL AND ORTHOTIC PRACTICES THROUGHOUT THE COUNTRY. ALL PROCEDURES INCLUDE MODEL OF PATIENT WHEN INDICATED.

SCOLIOSIS - CERVICAL- THORACIC - LUMBAR - SACRAL (MILWAUKEE)
L1000 - L1199

L1000 CERVICAL-THORACIC-LUMBAR-SACRAL ORTHOSIS (CTLSD) (MILWAUKEE), INCLUSIVE OF FURNISHING INITIAL ORTHOSIS, INCLUDING MODEL

CORRECTION PADS

L1010 ADDITION TO CERVICAL-THORACIC-LUMBAR-SACRAL ORTHOSIS (CTLSD) OR SCOLIOSIS ORTHOSIS, AXILLA SLING

L1020 ADDITION TO CTLSD OR SCOLIOSIS ORTHOSIS, KYPHOSIS PAD

L1025 ADDITION TO CTLSD OR SCOLIOSIS ORTHOSIS, KYPHOSIS PAD, FLOATING

L1030 ADDITION TO CTLSD OR SCOLIOSIS ORTHOSIS, LUMBAR BOLSTER PAD

L1040 ADDITION TO CTLSD OR SCOLIOSIS ORTHOSIS, LUMBAR OR LUMBAR RIB PAD

L1050 ADDITION TO CTLSD OR SCOLIOSIS ORTHOSIS, STERNAL PAD

L1060 ADDITION TO CTLSD OR SCOLIOSIS ORTHOSIS, THORACIC PAD

L1070 ADDITION TO CTLSD OR SCOLIOSIS ORTHOSIS, TRAPEZIUS SLING

L1080 ADDITION TO CTLSD OR SCOLIOSIS ORTHOSIS, OUTRIGGER

M/D=1187 A/C=E COV DCA

M/D=1187 A/C=E COV DCA

M/D=1187 A/C=E COV DCA

M/D=1187 A/C=A COV DCA

M/D=1187 A/C=E COV DCA

M/D=1187 A/C=E COV DCA

M/D=1187 A/C=E COV DCA

M/D=1187 A/C=E COV DCA

M/D=1187 A/C=E COV DCA

M/D=1187 A/C=E COV DCA

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L1085 ADDITION TO CTLSO OR SCOLIOSIS ORTHOSIS, OUTRIGGER, BILATERAL WITH VERTICAL EXTENSIONS

L1090 ADDITION TO CTLSO OR SCOLIOSIS ORTHOSIS, LUMBAR SLING

L1100 ADDITION TO CTLSO OR SCOLIOSIS ORTHOSIS, RING FLANGE, PLASTIC OR LEATHER

L1110 ADDITION TO CTLSO OR SCOLIOSIS ORTHOSIS, RING FLANGE, PLASTIC OR LEATHER, MOLDED TO PATIENT MODEL

L1120 ADDITION TO CTLSO, SCOLIOSIS ORTHOSIS, COVER FOR UPRIGHT, EACH

SCOLIOSIS - THORACIC - LUMBAR - SACRAL (LOW PROFILE) - L1200-L1299

L1200 THORACIC-LUMBAR-SACRAL-ORTHOSIS (TLSO), INCLUSIVE OF FURNISHING INITIAL ORTHOSIS ONLY

L1210 ADDITION TO TLSO, (LOW PROFILE), LATERAL THORACIC EXTENSION

L1220 ADDITION TO TLSO, (LOW PROFILE), ANTERIOR THORACIC EXTENSION

L1230 ADDITION TO TLSO, (LOW PROFILE), MILWAUKEE TYPE SUPERSTRUCTURE

L1240 ADDITION TO TLSO, (LOW PROFILE), LUMBAR DEROTATION PAD

L1250 ADDITION TO TLSO, (LOW PROFILE), ANTERIOR ASIS PAD

L1260 ADDITION TO TLSO, (LOW PROFILE), ANTERIOR THORACIC DEROTATION PAD

L1270 ADDITION TO TLSO, (LOW PROFILE), ABDOMINAL PAD

L1280 ADDITION TO TLSO, (LOW PROFILE), RIG GUSSET (ELASTIC), EACH

L1290 ADDITION TO TLSO, (LOW PROFILE), LATERAL TROCHANTERIC PAD

OTHER SCOLIOSIS PROCEDURES - L1300-L1399

L1300 OTHER SCOLIOSIS PROCEDURE, BODY JACKET MOLDED TO PATIENT MODEL

L1310 OTHER SCOLIOSIS PROCEDURE, POST-OPERATIVE BODY JACKET

L1499 UNLISTED PROCEDURE FOR SPINAL ORTHOSIS

M/D=1187 A/C=A COV DCA

M/D=1187 A/C=E COV DCA

M/D=1187 A/C=E COV DCA

M/D=1187 A/C=E COV DCA

M/D=1187 A/C=E COV DCA

M/D= 986 A/C=E COV DCA

M/D=1188 A/C=E COV DCA

M/D=1187 A/C=E COV DCA

M/D=1187 A/C=E COV DCA

M/D=1187 A/C=A COV DCA

M/D=1187 A/C=A COV DCA

M/D=1187 A/C=A COV DCA

M/D=1187 A/C=A COV DCA

M/D=1187 A/C=A COV DCA

M/D=1187 A/C=E DCA

M/D=1187 A/C=E COV DCA

M/D=1187 A/C=E COV DCA

M/D=1181 A/C COV DCA

THORACIC - HIP - KNEE - ANKLE - L1500-L1599

L1500 THORACIC-HIP-KNEE-ANKLE ORTHOSIS (THKAO), MOBILITY FRAME
(NEWINGTON, PARAPODIUM TYPES)

L1510 THKAO, STANDING FRAME

L1520 THKAO, SWIVEL WALKER

ORTHOTIC DEVICES - LOWER LIMB - L1600 - L2999

NOTE: LOWER LIMB
THE PROCEDURES IN L1600-L2999 ARE CONSIDERED AS 'BASE' OR
'BASIC PROCEDURES' AND MAY BE MODIFIED BY LISTING PROCEDURE
FROM THE 'ADDITIONS SECTIONS' AND ADDING THEM TO THE BASE
PROCEDURE.

LOWER LIMB - HIP - L1600-L1699

FLEXIBLE

L1600 HIP ORTHOSIS (HO), ABDUCTION CONTROL OF HIP JOINTS, FLEXIBLE,
FREJKA TYPE WITH COVER

L1610 HO, ABDUCTION CONTROL OF HIP JOINTS, FLEXIBLE, FREJKA COVER
ONLY

L1620 HO, ABDUCTION CONTROL OF HIP JOINTS, FLEXIBLE, PAVLIK HARNESS

L1630 HO, ABDUCTION CONTROL OF HIP JOINTS, SEMI-FLEXIBLE
(VON ROSEN TYPE)

L1640 HO, ABDUCTION CONTROL OF HIP JOINTS, STATIC, PELVIC
BAND OR SPREADER BAR, THIGH CUFFS

L1650 HO, ABDUCTION CONTROL OF HIP JOINTS, STATIC, ADJUSTABLE,
CUSTOM FITTED (ILFLED TYPE)

L1660 HO, ABDUCTION CONTROL OF HIP JOINTS, STATIC, PLASTIC, CUSTOM
FITTED

L1670 HO, ABDUCTION CONTROL OF HIP JOINTS, DYNAMIC, ATTACHED TO
SHOE (CRAIG TYPE)

L1680 HO, ABDUCTION CONTROL OF HIP JOINTS, DYNAMIC, PELVIC
CONTROL, ADJUSTABLE HIP MOTION CONTROL, THIGH CUFFS (RANCHO
HIP ACTION TYPE)

M/D=1187 A/C=E COV DCA

M/D=1181 A/C COV DCA

M/D=1181 A/C COV DCA

M/D=1187 A/C=E COV DCA

M/D=1181 A/C COV DCA

M/D=1181 A/C COV DCA

M/D=1181 A/C COV DCA

M/D=1181 A/C COV DCA

M/D=1181 A/C COV DCA

M/D=1181 A/C COV DCA

M/D=1188 A/C=D COV DCA

M/D=1181 A/C COV DCA

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L1685 HO, ABDUCTION CONTROL OF HIP JOINT, POST-OPERATIVE HIP ABDUCTION TYPE,
CUSTOM FABRICATED

L1686 HO, ABDUCTION CONTROL OF HIP JOINT, POST-OPERATIVE HIP ABDUCTION TYPE,
CUSTOM FITTED

LOWER LIMB - LEGG PERTHES - L1700-L1799

L1700 LEGG PERTHES ORTHOSIS, TORONTO TYPE

L1710 LEGG PERTHES ORTHOSIS, NEWINGTON TYPE

L1720 LEGG PERTHES ORTHOSIS, TRILATERAL, (TACHDIJAN TYPE)

L1730 LEGG PERTHES ORTHOSIS, SCOTTISH RITE TYPE

L1740 LEGG PERTHES ORTHOSIS, POST OPERATIVE HIP ABDUCTION
TYPE

L1750 LEGG PERTHES ORTHOSIS, LEGG PERTHES SLING (SAM
BROWN TYPE)

L1755 LEGG PERTHES ORTHOSIS, PATTEN BOTTOM TYPE

LOWER LIMB - KNEE - L1800-L1899

L1800 KNEE ORTHOSIS (KO), ELASTIC WITH STAYS

L1810 KO, ELASTIC WITH JOINTS

L1815 KO, ELASTIC WITH CONDYLAR PADS

L1820 KO, ELASTIC WITH CONDYLAR PADS AND JOINTS

L1825 KO, ELASTIC KNEE CAP

L1830 KO, IMMOBILIZER, CANVAS LONGITUDINAL

L1832 KO, ADJUSTABLE KNEE JOINTS, POSITIONAL ORTHOSIS, RIGID SUPPORT, CUSTOM FITTED

L1834 KO, WITHOUT KNEE JOINT, RIGID, MOLDED TO PATIENT MODEL

L1840 KO, DEROTATION, MEDIAL-LATERAL, ANTERIOR CRUCIATE LIGAMENT, CUSTOM FABRICATED
TO PATIENT MODEL

L1845 KO, DOUBLE UPRIGHT, THIGH AND CALF, WITH ADJUSTABLE FLEXION AND EXTENSION
JOINT, MEDIAL-LATERAL AND ROTATION CONTROL, CUSTOM FITTED

M/D=1188 A/C=C COV DCA

M/D=1188 A/C=A COV DCA

M/D=1181 A/C COV DCA

M/D=1181 A/C COV DCA

M/D=1184 A/C COV DCA

M/D=1181 A/C COV DCA

M/D=1187 A/C=D COV DCA
XR1=L1685 XR2 XR3

M/D=1181 A/C COV DCA

M/D=1187 A/C=A COV DCA

M/D=1187 A/C=E COV DCA

M/D=1181 A/C COV DCA

M/D=1187 A/C=A COV DCA

M/D=1187 A/C=E COV DCA

M/D=1184 A/C COV DCA

M/D= 986 A/C=E COV DCA

M/D=1188 A/C=A COV DCA

M/D=1188 A/C=A COV DCA

M/D=1187 A/C=C COV DCA

M/D=1187 A/C=A COV DCA

L1846	KD, DOUBLE UPRIGHT, THIGH AND CALF, WITH ADJUSTABLE FLEXION AND EXTENSION JOINT, MEDIAL-LATERAL AND ROTATION CONTROL, MOLDED TO PATIENT MODEL	M/D=1187	A/C=A	COV	DCA
L1850	KD, SWEDISH TYPE	M/D=1181	A/C	COV	DCA
L1855	KD, MOLDED PLASTIC, THIGH AND CALF SECTIONS, WITH DOUBLE UPRIGHT KNEE JOINTS, MOLDED TO PATIENT MODEL	M/D=1187	A/C=A	COV	DCA
L1858	KD, MOLDED PLASTIC, POLYCENTRIC KNEE JOINTS, PNEUMATIC KNEE PADS (CTI)	M/D=1187	A/C=A	COV	DCA
L1860	KD, MODIFICATION OF SUPRACONDYLAR PROSTHETIC SOCKET, MOLDED TO PATIENT MODEL (SK)	M/D=1181	A/C	COV	DCA
L1870	KD, DOUBLE UPRIGHT, THIGH AND CALF LACERS, MOLDED TO PATIENT MODEL WITH KNEE JOINTS	M/D=1181	A/C	COV	DCA
L1880	KD, DOUBLE UPRIGHT, NON-MOLDED THIGH AND CALF CUFFS/LACERS WITH KNEE JOINTS	M/D=1181	A/C	COV	DCA
LOWER LIMB - ANKLE - FOOT - L1900-L1999					
L1900	ANKLE-FOOT ORTHOSIS (AFO), SPRING WIRE, DORSIFLEXION ASSIST CALF BAND	M/D=1187	A/C=E	COV	DCA
L1902	AFO, ANKLE GAUNTLET, CUSTOM FITTED	M/D=1187	A/C=A	COV	DCA
L1904	AFO, MOLDED ANKLE GAUNTLET, MOLDED TO PATIENT MODEL	M/D=1187	A/C=A	COV	DCA
L1906	AFO, MULTILIGAMENTOUS ANKLE SUPPORT	M/D=1187	A/C=A	COV	DCA
L1910	AFO, POSTERIOR, SINGLE BAR, CLASP ATTACHMENT TO SHOE COUNTER	M/D=1181	A/C	COV	DCA
L1920	AFO, SINGLE UPRIGHT WITH STATIC OR ADJUSTABLE STOP (PHELPS OR PERLSTEIN TYPE)	M/D=1181	A/C	COV	DCA
L1930	AFO, CUSTOM FITTED, PLASTIC	M/D=1181	A/C	COV	DCA
L1940	AFO, MOLDED TO PATIENT MODEL, PLASTIC	M/D=1181	A/C	COV	DCA
L1945	AFO, MOLDED TO PATIENT MODEL, PLASTIC, RIGID ANTERIOR TIBIAL SECTION (FLOOR REACTION)	M/D=1188	A/C=A	COV	DCA
L1950	AFO, SPIRAL, MOLDED TO PATIENT MODEL (IRM TYPE), PLASTIC	M/D=1181	A/C	COV	DCA
L1960	AFO, POSTERIOR SOLID ANKLE, MOLDED TO PATIENT MODEL, PLASTIC	M/D=1181	A/C	COV	DCA
L1970	AFO, PLASTIC MOLDED TO PATIENT MODEL, WITH ANKLE JOINT	M/D=1181	A/C	COV	DCA

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HCFA COMMON PROCEDURE CODING SYSTEM

L1980 AFO, SINGLE UPRIGHT FREE PLANTAR DORSIFLEXION, SOLID STIRRUP,
CALF BAND/CUFF (SINGLE BAR "BK" ORTHOSIS)

L1990 AFO, DOUBLE UPRIGHT FREE PLANTAR DORSIFLEXION, SOLID STIRRUP,
CALF BAND/CUFF (DOUBLE BAR "BK" ORTHOSIS)

LOWER LIMB-HIP-KNEE-ANKLE-FOOT (OR ANY COMBINATION) -L2000-L2199

NOTE: L2000, L2020, AND L2036 ARE BASE PROCEDURES TO BE USED WITH ANY KNEE
JOINT. L2010 AND L2030 ARE TO BE USED ONLY WITH NO KNEE JOINT.

L2000 KNEE-ANKLE-FOOT-ORTHOSIS (KAFO), SINGLE UPRIGHT, FREE
KNEE, FREE ANKLE, SOLID STIRRUP, THIGH AND CALF BANDS/CUFFS
(SINGLE BAR "AK" ORTHOSIS)

L2010 KAFO, SINGLE UPRIGHT, FREE ANKLE, SOLID STIRRUP,
THIGH AND CALF BANDS/CUFFS (SINGLE BAR "AK" ORTHOSIS),
WITHOUT KNEE JOINT

L2020 KAFO, DOUBLE UPRIGHT, FREE KNEE, FREE ANKLE, SOLID STIRRUP,
THIGH AND CALF BANDS/CUFFS (DOUBLE BAR "AK" ORTHOSIS)

L2030 KAFO, DOUBLE UPRIGHT, FREE ANKLE, SOLID STIRRUP,
THIGH AND CALF BANDS/CUFFS, (DOUBLE BAR "AK" ORTHOSIS),
WITHOUT KNEE JOINT

L2035 KAFO, FULL PLASTIC, MOLDED TO PATIENT MODEL (SKA, FLOOR REACTION TYPES)

L2036 KAFO, FULL PLASTIC, DOUBLE UPRIGHT, FREE KNEE, MOLDED TO PATIENT MODEL

L2037 KAFO, FULL PLASTIC, SINGLE UPRIGHT, FREE KNEE, MOLDED TO PATIENT MODEL

L2038 KAFO, FULL PLASTIC, WITHOUT KNEE JOINT, MULTI-AXIS ANKLE, MOLDED TO PATIENT
MODEL (LIVELY ORTHOSIS OR EQUAL)

TORSION CONTROL

L2040 HIP-KNEE-ANKLE-FOOT ORTHOSIS (HKAFO) TORSION CONTROL, BILATERAL
ROTATION STRAPS, PELVIC BAND/BELT

L2050 HKAFO, TORSION CONTROL, BILATERAL TORSION CABLES, HIP
JOINT, PELVIC BAND/BELT

L2060 HKAFO, TORSION CONTROL, BILATERAL TORSION CABLES, BALL
BEARING HIP JOINT, PELVIC BAND/ BELT

M/D=1181 A/C COV DCA

M/D=1181 A/C COV DCA

M/D=1187 A/C A DCA

M/D=1187 A/C A DCA

M/D=1184 A/C COV DCA

M/D=1187 A/C=E COV DCA

M/D=1184 A/C COV DCA

M/D=1187 A/C=E COV DCA

M/D=1187 A/C=D COV DCA
XR1=L2036 XR2 XR3

M/D=1188 A/C=C COV DCA

M/D=1188 A/C=A COV DCA

M/D=1188 A/C=A COV DCA

M/D=1187 A/C=E COV DCA

M/D=1181 A/C COV DCA

M/D=1181 A/C COV DCA

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L2070	HKAFO, TORSION CONTROL, UNILATERAL ROTATION STRAPS, PELVIC BAND/BELT	M/D=1181 A/C COV DCA
L2080	HKAFO, TORSION CONTROL, UNILATERAL TORSION CABLE, HIP JOINT, PELVIC BAND/BELT	M/D=1187 A/C=E COV DCA
L2090	HKAFO, TORSION CONTROL, UNILATERAL TORSION CABLE, BALL BEARING HIP JOINT, PELVIC BAND/ BELT FRACTURE ORTHOSES	M/D=1185 A/C=C COV DCA
L2100	ANKLE-FOOT-ORTHOSIS (AFO), FRACTURE ORTHOSES, TIBIAL FRACTURE CAST ORTHOSIS, PLASTER OF PARIS, SOLID ANKLE	M/D=1187 A/C=D COV DCA XR1=L2102 XR2=L2104 XR3
L2102	ANKLE-FOOT-ORTHOSIS (AFO), FRACTURE ORTHOSIS, TIBIAL FRACTURE CAST ORTHOSIS, PLASTER TYPE CASTING MATERIAL, MOLDED TO PATIENT	M/D=1187 A/C=A COV DCA
L2104	AFO, FRACTURE ORTHOSIS, TIBIAL FRACTURE CAST ORTHOSIS, SYNTHETIC TYPE CASTING MATERIAL, MOLDED TO PATIENT	M/D=1187 A/C=A COV DCA
L2106	AFO, FRACTURE ORTHOSIS, TIBIAL FRACTURE CAST ORTHOSIS, THERMOPLASTIC TYPE CASTING MATERIAL, MOLDED TO PATIENT	M/D=1187 A/C=A COV DCA
L2108	AFO, FRACTURE ORTHOSIS, TIBIAL FRACTURE CAST ORTHOSIS, MOLDED TO PATIENT MODEL	M/D=1187 A/C=A COV DCA
L2110	AFO, FRACTURE ORTHOSES, TIBIAL FRACTURE CAST ORTHOSIS, PLASTER OF PARIS, PLASTIC SHOE INSERT WITH ANKLE JOINTS	M/D=1187 A/C=D COV DCA XR1=L2102 XR2=L2180 XR3
L2112	AFO, FRACTURE ORTHOSIS, TIBIAL FRACTURE ORTHOSIS, SOFT CUSTOM FITTED	M/D=1187 A/C=A COV DCA
L2114	AFO, FRACTURE ORTHOSIS, TIBIAL FRACTURE ORTHOSIS, SEMI-RIGID CUSTOM FITTED	M/D=1187 A/C=A COV DCA
L2116	AFO, FRACTURE ORTHOSIS, TIBIAL FRACTURE ORTHOSIS, RIGID CUSTOM FITTED	M/D=1187 A/C=A COV DCA
L2120	AFO, FRACTURE ORTHOSES, TIBIAL FRACTURE ORTHOSIS, WITH PLASTIC CONSTRUCTION	M/D=1187 A/C=D COV DCA XR1=L2106 XR2=L2114 XR3=L2116
L2122	KNEE-ANKLE-FOOT-ORTHOSIS, (KAFO), FRACTURE ORTHOSIS, FEMORAL FRACTURE CAST ORTHOSIS, PLASTER TYPE CASTING MATERIAL, MOLDED TO PATIENT	M/D=1187 A/C=A COV DCA
L2124	KAFO, FRACTURE ORTHOSIS, FEMORAL FRACTURE CAST ORTHOSIS, SYNTHETIC TYPE CASTING MATERIAL, MOLDED TO PATIENT	M/D=1187 A/C=A COV DCA
L2126	KAFO, FRACTURE ORTHOSIS, FEMORAL FRACTURE CAST ORTHOSIS, THERMOPLASTIC TYPE CASTING MATERIAL, MOLDED TO PATIENT	M/D=1187 A/C=A COV DCA
L2128	KAFO, FRACTURE ORTHOSIS, FEMORAL FRACTURE CAST ORTHOSIS, MOLDED TO PATIENT MODEL	M/D=1187 A/C=A COV DCA

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HCFA COMMON PROCEDURE CODING SYSTEM

L2130	AFO FRACTURE ORTHOSES, TIBIAL FRACTURE ORTHOSIS, PLASTER OF PARIS, WITH CABLE ATTACHMENT	M/D=1187 A/C=D COV	DCA
L2132	KAFD, FRACTURE ORTHOSIS, FEMORAL FRACTURE CAST ORTHOSIS, SOFT CUSTOM FITTED	M/D=1187 A/C=A COV	DCA
L2134	KAFD, FRACTURE ORTHOSIS, FEMORAL FRACTURE CAST ORTHOSIS, SEMI-RIGID CUSTOM FITTED	M/D=1187 A/C=A COV	DCA
L2136	KAFD, FRACTURE ORTHOSIS, FEMORAL FRACTURE CAST ORTHOSIS, RIGID CUSTOM FITTED	M/D=1187 A/C=A COV	DCA
L2140	KNEE-ANKLE-FOOT ORTHOSES (KAFD), FRACTURE ORTHOSES, FEMORAL FRACTURE CAST ORTHOSIS, PLASTER OF PARIS, KNEE JOINTS, SOLID ANKLE	M/D=1187 A/C=D COV XR1=L2122 XR2=L2124	DCA XRS
L2150	KAFD, FRACTURE ORTHOSES, FEMORAL FRACTURE CAST ORTHOSES, PLASTER OF PARIS, KNEE JOINTS, SOLID ANKLE, WITH ADJUSTABLE FEMORAL SECTION	M/D=1187 A/C=D COV XR1=L2134 XR2	DCA XRS
L2160	HIP-ANKLE-FOOT ORTHOSES (HAFD), FRACTURE ORTHOSES, HIP FLEXION-ABDUCTION STABILIZER, PLASTIC, MOLDED TO PATIENT MODEL (SIMILAR TO SPICA CAST)	M/D=1187 A/C=D COV	DCA
	ADDITIONS TO FRACTURE ORTHOSIS		
L2180	ADDITION TO LOWER EXTREMITY FRACTURE ORTHOSIS, PLASTIC SHOE INSERT WITH ANKLE JOINTS	M/D=1187 A/C=A COV	DCA
L2182	ADDITION TO LOWER EXTREMITY FRACTURE ORTHOSIS, DROP LOCK KNEE JOINT	M/D=1187 A/C=A COV	DCA
L2184	ADDITION TO LOWER EXTREMITY FRACTURE ORTHOSIS, LIMITED MOTION KNEE JOINT	M/D=1187 A/C=A COV	DCA
L2186	ADDITION TO LOWER EXTREMITY FRACTURE ORTHOSIS, ADJUSTABLE MOTION KNEE JOINT, LERMAN TYPE	M/D=1187 A/C=A COV	DCA
L2188	ADDITION TO LOWER EXTREMITY FRACTURE ORTHOSIS, QUADRILATERAL BRIM	M/D=1187 A/C=A COV	DCA
L2190	ADDITION TO LOWER EXTREMITY FRACTURE ORTHOSIS, WAIST BELT	M/D=1187 A/C=A COV	DCA
L2192	ADDITION TO LOWER EXTREMITY FRACTURE ORTHOSIS, HIP JOINT, PELVIC BAND, THIGH FLANGE, AND PELVIC BELT	M/D=1187 A/C=A COV	DCA
	ADDITIONS TO LOWER EXTREMITY ORTHOSIS - L2200-L2999		
	ADDITIONS - SHOE - ANKLE - SHIN - KNEE - L2200 - L2399	M/D=1187 A/C=C	DCA
L2200	ADDITION TO LOWER EXTREMITY, LIMITED ANKLE MOTION, EACH JOINT	M/D=1187 A/C=E COV	DCA

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L2210	ADDITION TO LOWER EXTREMITY, DORSIFLEXION ASSIST (PLANTAR FLEXION RESIST), EACH JOINT	*	M/D=1187 A/C=C COV	DCA
L2220	ADDITION TO LOWER EXTREMITY, DORSIFLEXION AND PLANTAR FLEXION ASSIST/RESIST, EACH JOINT	*	M/D=1187 A/C=C COV	DCA
L2230	ADDITION TO LOWER EXTREMITY, SPLIT FLAT CALIPER STIRRUPS AND PLATE ATTACHMENT	*	M/D=1187 A/C=E COV	DCA
L2240	ADDITION TO LOWER EXTREMITY, ROUND CALIPER AND PLATE ATTACHMENT	*	M/D=1187 A/C=E COV	DCA
L2250	ADDITION TO LOWER EXTREMITY, FOOT PLATE, MOLDED TO PATIENT MODEL, STIRRUP ATTACHMENT	*	M/D=1187 A/C=E COV	DCA
L2260	ADDITION TO LOWER EXTREMITY, REINFORCED SOLID STIRRUP (SCOTT-CRAIG TYPE)	*	M/D=1187 A/C=E COV	DCA
L2265	ADDITION TO LOWER EXTREMITY, LONG TONGUE STIRRUP	*	M/D=1188 A/C=A COV	DCA
L2270	ADDITION TO LOWER EXTREMITY, VARUS/VALGUS CORRECTION ("T") STRAP, PADDED/LINED OR MALLEOLUS PAD	*	M/D=1187 A/C=E COV	DCA
L2280	ADDITION TO LOWER EXTREMITY, MOLDED INNER BOOT	*	M/D=1187 A/C=E COV	DCA
L2300	ADDITION TO LOWER EXTREMITY, ABDUCTION BAR (BILATERAL HIP INVOLVEMENT), JOINTED, ADJUSTABLE	*	M/D=1187 A/C=E COV	DCA
L2310	ADDITION TO LOWER EXTREMITY, ABDUCTION BAR-STRAIGHT	*	M/D=1187 A/C=E COV	DCA
L2320	ADDITION TO LOWER EXTREMITY, NON-MOLDED LACER	*	M/D=1187 A/C=E COV	DCA
L2330	ADDITION TO LOWER EXTREMITY, LACER MOLDED TO PATIENT MODEL	*	M/D=1187 A/C=E COV	DCA
L2335	ADDITION TO LOWER EXTREMITY, ANTERIOR SWING BAND	*	M/D=1187 A/C=A COV	DCA
L2340	ADDITION TO LOWER EXTREMITY, PRE-TIBIAL SHELL, MOLDED TO PATIENT MODEL	*	M/D=1187 A/C=E COV	DCA
L2350	ADDITION TO LOWER EXTREMITY, PROSTHETIC TYPE, (BK) SOCKET, MOLDED TO PATIENT MODEL, (USED FOR 'PTB' 'AFO' ORTHOSES)	*	M/D=1187 A/C=E COV	DCA
L2360	ADDITION TO LOWER EXTREMITY, EXTENDED STEEL SHANK	*	M/D=1187 A/C=E COV	DCA
L2370	ADDITION TO LOWER EXTREMITY, PATTEN BOTTOM	*	M/D=1187 A/C=A COV	DCA
L2375	ADDITION TO LOWER EXTREMITY, TORSION CONTROL, ANKLE JOINT AND HALF SOLID STIRRUP	*	M/D=1187 A/C=A COV	DCA
L2380	ADDITION TO LOWER EXTREMITY, TORSION CONTROL, STRAIGHT KNEE JOINT, EACH JOINT	*	M/D=1187 A/C=A COV	DCA

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L2385 ADDITION TO LOWER EXTREMITY, STRAIGHT KNEE JOINT, HEAVY DUTY, EACH JOINT

L2390 ADDITION TO LOWER EXTREMITY, OFFSET KNEE JOINT, EACH JOINT

L2395 ADDITION TO LOWER EXTREMITY, OFFSET KNEE JOINT, HEAVY DUTY, EACH JOINT

ADDITIONS TO STRAIGHT KNEE OR OFFSET KNEE JOINTS L2400-L2499

L2400 ADDITIONS TO LOWER EXTREMITY, KNEE, STRAIGHT KNEE JOINT, DROP LOCK, EACH JOINT

L2405 ADDITION TO KNEE JOINT, DROP LOCK, EACH JOINT

L2410 ADDITIONS TO LOWER EXTREMITY, KNEE, STRAIGHT KNEE JOINT, CAM LOCK (SWISS, FRENCH, BAIL TYPES), EACH JOINT

L2415 ADDITION TO KNEE JOINT, CAM LOCK (SWISS, FRENCH, BAIL TYPES) EACH JOINT

L2420 ADDITIONS TO LOWER EXTREMITY, KNEE, STRAIGHT KNEE JOINT, DISC OR DIAL LOCK FOR ADJUSTABLE KNEE FLEXION, EACH JOINT

L2425 ADDITION TO KNEE JOINT, DISC OR DIAL LOCK FOR ADJUSTABLE KNEE FLEXION, EACH JOINT

L2430 ADDITIONS TO LOWER EXTREMITY, KNEE, STRAIGHT KNEE JOINT, POLYCENTRIC JOINT, EACH JOINT

L2435 ADDITION TO KNEE JOINT, POLYCENTRIC JOINT, EACH JOINT

L2440 ADDITIONS TO LOWER EXTREMITY, KNEE, STRAIGHT KNEE JOINT, HEAVY DUTY JOINT, EACH

L2450 ADDITIONS TO LOWER EXTREMITY, OFFSET KNEE JOINT, FREE, EACH JOINT

L2460 ADDITIONS TO LOWER EXTREMITY, OFFSET KNEE JOINT, DROP LOCK, EACH JOINT

L2470 ADDITIONS TO LOWER EXTREMITY, OFFSET KNEE JOINT, BAIL LOCK, EACH JOINT

L2475 ADDITION TO KNEE JOINT, BAIL LOCK, EACH JOINT

L2480 ADDITIONS TO LOWER EXTREMITY, OFFSET KNEE JOINT, HEAVY DUTY JOINT, EACH

L2490 ADDITIONS TO LOWER EXTREMITY, OFFSET KNEE JOINT, LIFT LOOP, FOR DROP LOCK RING

M/D=1187 A/C=A COV DCA

M/D=1187 A/C=A COV DCA

M/D=1187 A/C=A COV DCA

M/D=1187 A/C=A DCA

M/D=1187 A/C=D COV DCA

M/D=1187 A/C=A COV DCA

M/D=1187 A/C=D COV DCA

M/D=1187 A/C=A COV DCA

M/D=1187 A/C=D COV DCA

M/D=1187 A/C=A COV DCA

M/D=1187 A/C=D COV DCA

M/D=1187 A/C=A COV DCA

M/D=1187 A/C=D COV DCA
XR1=L2385 XR2 XR3M/D=1187 A/C=D COV DCA
XR1=L2390 XR2=L2395 XR3

M/D=1187 A/C=D COV DCA

M/D=1187 A/C=D COV DCA

M/D=1188 A/C=D COV DCA
XR1=L2415 XR2 XR3M/D=1187 A/C=D COV DCA
XR1=L2395 XR2 XR3M/D=1187 A/C=D COV DCA
XR1=L2390 XR2=L2492 XR3

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L2492 ADDITION TO KNEE JOINT, LIFT LOOP FOR DROP LOCK RING

L2495 ADDITIONS TO LOWER EXTREMITY, OFFSET KNEE JOINT, KNEE CONTROL,
STRAP OR PAD

ADDITIONS - THIGH/WEIGHT BEARING - L2500-L2599

GLUTEAL/ISCHIAL WEIGHT

L2500 ADDITION TO LOWER EXTREMITY, THIGH/WEIGHT BEARING, GLUTEAL/
ISCHIAL WEIGHT BEARING, RING

L2510 ADDITION TO LOWER EXTREMITY, THIGH/WEIGHT BEARING, QUADRI-
LATERAL BRIM, MOLDED TO PATIENT MODEL

L2520 ADDITION TO LOWER EXTREMITY, THIGH/WEIGHT BEARING, QUADRI-
LATERAL BRIM, CUSTOM FITTED

L2525 ADDITION TO LOWER EXTREMITY, THIGH/WEIGHT BEARING, ISCHIAL CONTAINMENT/NARROW
M-L BRIM MOLDED TO PATIENT MODEL

L2526 ADDITION TO LOWER EXTREMITY, THIGH/WEIGHT BEARING, ISCHIAL CONTAINMENT/NARROW
M-L BRIM, CUSTOM FITTED

L2530 ADDITION TO LOWER EXTREMITY, THIGH-WEIGHT BEARING, LACER,
NON-MOLDED

L2540 ADDITION TO LOWER EXTREMITY, THIGH/WEIGHT BEARING, LACER,
MOLDED TO PATIENT MODEL

L2550 ADDITION TO LOWER EXTREMITY, THIGH/WEIGHT BEARING, HIGH
ROLL CUFF

L2560 ADDITION TO LOWER EXTREMITY, GLUTEAL/ISCHIAL WEIGHT BEARING

ADDITIONS - PELVIC AND THORACIC
CONTROL - L2570 - L2699

L2570 ADDITION TO LOWER EXTREMITY, PELVIC CONTROL, HIP JOINT, CLEVIS TYPE
TWO POSITION JOINT, EACH

L2580 ADDITION TO LOWER EXTREMITY, PELVIC CONTROL, PELVIC SLING

L2600 ADDITION TO LOWER EXTREMITY, PELVIC CONTROL, HIP JOINT,
CLEVIS TYPE, OR THRUST BEARING, FREE, EACH

L2610 ADDITION TO LOWER EXTREMITY, PELVIC CONTROL, HIP JOINT,
CLEVIS OR THRUST BEARING, LOCK, EACH

M/D=1187 A/C=A COV DCA
M/D=1187 A/C=D COV DCA
XR1=L2795 XR2=L2800 XR3=L2810

M/D=1188 A/C=E COV DCA

M/D=1187 A/C=E COV DCA

M/D=1187 A/C=E COV DCA

M/D=1188 A/C=A COV DCA

M/D=1188 A/C=A COV DCA

M/D=1187 A/C=E COV DCA

M/D=1187 A/C=E COV DCA

M/D=1187 A/C=E COV DCA

M/D=1188 A/C=D COV DCA

M/D=1188 A/C=A DCA

M/D=1188 A/C=A DCA

M/D=1188 A/C=C COV DCA

M/D=1188 A/C=C COV DCA

M/D=1187 A/C=E COV DCA

M/D=1187 A/C=E COV DCA

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L2620	ADDITION TO LOWER EXTREMITY, PELVIC CONTROL, HIP JOINT, HEAVY DUTY, EACH	•	M/D=1187 A/C=E COV	DCA
L2622	ADDITION TO LOWER EXTREMITY, PELVIC CONTROL, HIP JOINT, ADJUSTABLE FLEXION, EACH	•	M/D=1187 A/C=A COV	DCA
L2624	ADDITION TO LOWER EXTREMITY, PELVIC CONTROL, HIP JOINT, ADJUSTABLE FLEXION, EXTENSION, ADDUCTION CONTROL, EACH	•	M/D=1187 A/C=A COV	DCA
L2626	ADDITION TO LOWER EXTREMITY, PELVIC CONTROL, RECIPROCATING HIP JOINTS AND CABLES	•	M/D=1188 A/C=D COV	DCA
L2627	ADDITION TO LOWER EXTREMITY, PELVIC CONTROL, PLASTIC, MOLDED TO PATIENT MODEL, RECIPROCATING HIP JOINT AND CABLES	•	XR1=L2627 XR2=L2628 XRS	
L2628	ADDITION TO LOWER EXTREMITY, PELVIC CONTROL, METAL FRAME, RECIPROCATING HIP JOINT AND CABLES	•	M/D=1188 A/C=A COV	DCA
L2630	ADDITION TO LOWER EXTREMITY, PELVIC CONTROL, BAND AND BELT, UNILATERAL	•	M/D=1188 A/C=A COV	DCA
L2640	ADDITION TO LOWER EXTREMITY, PELVIC CONTROL, BAND AND BELT, BILATERAL	•	M/D=1187 A/C=E COV	DCA
L2650	ADDITION TO LOWER EXTREMITY, PELVIC AND THORACIC CONTROL, GLUTEAL PAD, EACH	•	M/D=1187 A/C=E COV	DCA
L2660	ADDITION TO LOWER EXTREMITY, THORACIC CONTROL, THORACIC BAND	•	M/D=1187 A/C=E COV	DCA
L2670	ADDITION TO LOWER EXTREMITY, THORACIC CONTROL, PARASPINAL UPRIGHTS	•	M/D=1187 A/C=E COV	DCA
L2680	ADDITION TO LOWER EXTREMITY, THORACIC CONTROL, LATERAL SUPPORT UPRIGHTS	•	M/D=1187 A/C=E COV	DCA
ADDITIONS - GENERAL - L2750-L2899		•	M/D=1187 A/C=C	DCA
L2750	ADDITION TO LOWER EXTREMITY ORTHOSIS, PLATING CHROME OR NICKEL, PER BAR	•	M/D=1187 A/C=C COV	DCA
L2760	ADDITION TO LOWER EXTREMITY ORTHOSIS, EXTENSION, PER EXTENSION, PER BAR (FOR LINEAL ADJUSTMENT FOR GROWTH)	•	M/D=1187 A/C=E COV	DCA
L2770	ADDITION TO LOWER EXTREMITY ORTHOSIS, STAINLESS STEEL-PER BAR OR JOINT	•	M/D=1187 A/C=E COV	DCA
L2780	ADDITION TO LOWER EXTREMITY ORTHOSIS, NON-CORROSIVE FINISH, PER BAR	•	M/D=1187 A/C=C COV	DCA

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L2785 ADDITION TO LOWER EXTREMITY ORTHOSIS, DROP LOCK RETAINER, EACH

L2795 ADDITION TO LOWER EXTREMITY ORTHOSIS, KNEE CONTROL, FULL KNEECAP

L2800 ADDITION TO LOWER EXTREMITY ORTHOSIS, KNEE CONTROL, KNEE CAP, MEDIAL OR LATERAL PULL

L2810 ADDITION TO LOWER EXTREMITY ORTHOSIS, KNEE CONTROL, CONDYLAR PAD

L2820 ADDITION TO LOWER EXTREMITY ORTHOSIS, SOFT INTERFACE FOR MOLDED PLASTIC, BELOW KNEE SECTION

L2830 ADDITION TO LOWER EXTREMITY ORTHOSIS, SOFT INTERFACE FOR MOLDED PLASTIC, ABOVE KNEE SECTION

L2840 ADDITION TO LOWER EXTREMITY ORTHOSIS, TIBIAL LENGTH SOCK, FRACTURE OR EQUAL, EACH

L2850 ADDITION TO LOWER EXTREMITY ORTHOSIS, FEMORAL LENGTH SOCK, FRACTURE OR EQUAL, EACH

L2999 UNLISTED PROCEDURES FOR LOWER EXTREMITY ORTHOSES

FOOT ORTHOPEDIC SHOES

SHOE MODIFICATIONS

TRANSFERS - L3000 - L3649

FOOT - L3000-L3199

INSERT, REMOVABLE, MOLDED TO PATIENT MODEL

L3000 FOOT, INSERT, REMOVABLE, MOLDED TO PATIENT MODEL, "UCB" TYPE, BERKELEY SHELL, EACH

L3001 FOOT, INSERT, REMOVABLE, MOLDED TO PATIENT MODEL, SPENCO, EACH

L3002 FOOT, INSERT, REMOVABLE, MOLDED TO PATIENT MODEL, PLASTAZOTE OR EQUAL, EACH

L3003 FOOT, INSERT, REMOVABLE, MOLDED TO PATIENT MODEL, SILICONE GEL, EACH

L3010 FOOT, INSERT, REMOVABLE, MOLDED TO PATIENT MODEL, LONGITUDINAL ARCH SUPPORT, EACH

M/D=1187 A/C=A COV DCA

M/D=1187 A/C=A COV DCA

M/D=1187 A/C=A COV DCA

M/D=1187 A/C=A COV DCA

M/D=1187 A/C=A COV DCA

M/D=1187 A/C=A COV DCA

M/D=1188 A/C=A COV DCA

M/D=1188 A/C=A COV DCA

M/D=1181 A/C COV DCA

M/D=1181 A/C COV DCA

M/D=1185 A/C=C COV DCA

M/D=1185 A/C=C COV DCA

M/D=1185 A/C=C COV DCA

M/D=1181 A/C COV DCA

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HCFA COMMON PROCEDURE CODING SYSTEM

L3020 FOOT, INSERT, REMOVABLE, MOLDED TO PATIENT MODEL, LONGITUDINAL/
METATARSAL SUPPORT, EACH

M/D=1187 A/C=E COV DCA

L3030 FOOT, INSERT, REMOVABLE, FORMED TO PATIENT FOOT, EACH

M/D=1181 A/C=C COV DCA

ARCH SUPPORT, REMOVABLE, PREMOLDED

M/D=1187 A/C=C DCA

L3040 FOOT, ARCH SUPPORT, REMOVABLE, PREMOLDED, LONGITUDINAL, EACH

M/D=1181 A/C COV DCA

L3050 FOOT, ARCH SUPPORT, REMOVABLE, PREMOLDED, METATARSAL, EACH

M/D=1181 A/C COV DCA

L3060 FOOT, ARCH SUPPORT, REMOVABLE, PREMOLDED, LONGITUDINAL/
METATARSAL, EACH

M/D=1181 A/C COV DCA

ARCH SUPPORT, NON-REMOVABLE, ATTACHED TO SHOE

L3070 FOOT, ARCH SUPPORT, NON-REMOVABLE ATTACHED TO SHOE,
LONGITUDINAL, EACH

M/D=1185 A/C=C COV DCA

L3080 FOOT, ARCH SUPPORT, NON-REMOVABLE ATTACHED TO SHOE,
METATARSAL, EACH

M/D=1185 A/C=C COV DCA

L3090 FOOT, ARCH SUPPORT, NON-REMOVABLE ATTACHED TO SHOE,
LONGITUDINAL/METATARSAL, EACH

M/D=1185 A/C=C COV DCA

L3100 HALLUS-VALGUS NIGHT DYNAMIC SPLINT

M/D=1184 A/C COV DCA

ABDUCTION AND ROTATION BARS

L3140 FOOT, ABDUCTION ROTATION BARS (DENNIS BROWNE TYPE), ATTACHED
TO SHOE

M/D=1181 A/C COV DCA

L3150 FOOT, ABDUCTION ROTATION BARS (DENNIS BROWNE TYPE), CLAMPED
TO SHOE

M/D=1185 A/C=C COV DCA

L3160 FOOT, TORQUE HEELS

M/D=1187 A/C=D COV DCA

L3170 FOOT, PLASTIC HEEL STABILIZER

M/D=1185 A/C=C COV DCA

ORTHOPEDIC FOOTWEAR - L3200-L3299

L3201 ORTHOPEDIC SHOE, OXFORD WITH SUPINATOR OR PRONATOR, INFANT

M/D=1185 A/C=C COV DCA

L3202 ORTHOPEDIC SHOE, OXFORD WITH SUPINATOR OR PRONATOR, CHILD

M/D=1185 A/C=C COV DCA

L3203 ORTHOPEDIC SHOE, OXFORD WITH SUPINATOR OR PRONATOR, JUNIOR

M/D=1185 A/C=C COV DCA

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L3204	ORTHOPEDIC SHOE, HIGHTOP WITH SUPINATOR OR PRONATOR, INFANT	•	M/D=1185 A/C=C COV	DCA
L3206	ORTHOPEDIC SHOE, HIGHTOP WITH SUPINATOR OR PRONATOR, CHILD	•	M/D=1185 A/C=C COV	DCA
L3207	ORTHOPEDIC SHOE, HIGHTOP WITH SUPINATOR OR PRONATOR, JUNIOR	•	M/D=1185 A/C=C COV	DCA
L3208	SURGICAL BOOT, EACH, INFANT	•	M/D=1185 A/C=C COV	DCA
L3209	SURGICAL BOOT, EACH, CHILD	•	M/D=1185 A/C=C COV	DCA
L3211	SURGICAL BOOT, EACH, JUNIOR	•	M/D=1185 A/C=C COV	DCA
L3212	BENESCH BOOT, PAIR, INFANT	•	M/D=1185 A/C=C COV	DCA
L3213	BENESCH BOOT, PAIR, CHILD	•	M/D=1185 A/C=C COV	DCA
L3214	BENESCH BOOT, PAIR, JUNIOR	•	M/D=1185 A/C=C COV	DCA
L3215	ORTHOPEDIC FOOTWEAR, LADIES SHOES, OXFORD	•	M/D=1185 A/C=C COV XR1=L3210 XR2	DCA XR3
L3216	ORTHOPEDIC FOOTWEAR, LADIES SHOES, DEPTH INLAY	•	M/D=1185 A/C=C COV	DCA
L3217	ORTHOPEDIC FOOTWEAR, LADIES SHOES, HIGHTOP, DEPTH INLAY	•	M/D=1185 A/C=C COV XR1=L3210 XR2	DCA XR3
L3218	ORTHOPEDIC FOOTWEAR, LADIES SURGICAL BOOT, EACH	•	M/D=1185 A/C=C COV XR1=L3210 XR2	DCA XR3
L3219	ORTHOPEDIC FOOTWEAR, MENS SHOES, OXFORD	•	M/D=1185 A/C=C COV XR1=L3210 XR2	DCA XR3
L3221	ORTHOPEDIC FOOTWEAR, MENS SHOES, DEPTH INLAY	•	M/D=1185 A/C=C COV	DCA
L3222	ORTHOPEDIC FOOTWEAR, MENS SHOES, HIGHTOP, DEPTH INLAY	•	M/D=1185 A/C=C COV XR1=L3220 XR2	DCA XR3
L3223	ORTHOPEDIC FOOTWEAR, MENS SURGICAL BOOT, EACH	•	M/D=1185 A/C=C COV XR1=L3220 XR2	DCA XR3
L3230	ORTHOPEDIC FOOTWEAR, CUSTOM SHOES, DEPTH INLAY	•	M/D=1185 A/C=C COV	DCA
L3250	ORTHOPEDIC FOOTWEAR, CUSTOM MOLDED SHOE, REMOVABLE INNER MOLD, PROSTHETIC SHOE, EACH	•	M/D=1183 A/C COV	DCA
L3251	FOOT, SHOE MOLDED TO PATIENT MODEL, SILICONE SHOE, EACH	•	M/D=1185 A/C=C COV XR1=L3110 XR2	DCA XR3
L3252	FOOT, SHOE MOLDED TO PATIENT MODEL, PLASTAZOTE (OR SIMILAR), CUSTOM FABRICATED, EACH	•	M/D=1185 A/C=C COV XR1=L3120 XR2	DCA XR3

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L3253 FOOT, MOLDED SHOE PLASTAZOTE (OR SIMILAR) CUSTOM FITTED, EACH

L3254 NON-STANDARD SIZE OR WIDTH

L3255 NON-STANDARD SIZE OR LENGTH

L3257 ORTHOPEDIC FOOTWEAR, ADDITIONAL CHARGE FOR SPLIT SIZE

L3260 AMBULATORY SURGICAL BOOT, EACH

L3265 PLASTAZOTE SANDAL, EACH

SHOE MODIFICATION - L3300-L3599

LIFTS

L3300 LIFT, ELEVATION, HEEL, TAPERED TO METATARSALS, PER INCH

L3310 LIFT, ELEVATION, HEEL AND SOLE, NEOPRENE, PER INCH

L3320 LIFT, ELEVATION, HEEL AND SOLE, CORK, PER INCH

L3330 LIFT, ELEVATION, METAL EXTENSION (SKATE)

L3332 LIFT, ELEVATION, INSIDE SHOE, TAPERED, UP TO ONE-HALF INCH

L3334 LIFT, ELEVATION, HEEL, PER INCH

WEDGES

L3340 HEEL WEDGE, SACH

L3350 HEEL WEDGE

L3360 SOLE WEDGE, OUTSIDE SOLE

L3370 SOLE WEDGE, BETWEEN SOLE

L3380 CLUBFOOT WEDGE

L3390 OUTFLARE WEDGE

L3400 METATARSAL BAR WEDGE, ROCKER

L3410 METATARSAL BAR WEDGE, BETWEEN SOLE

M/D=1185 A/C=C COV DCA
XR1=L3180 XR2 XR3

M/D=1183 A/C COV DCA

M/D=1183 A/C COV DCA

M/D=1187 A/C=A COV DCA

M/D=1185 A/C=C COV DCA

M/D=1185 A/C=C COV DCA

M/D=1187 A/C=C COV DCA

M/D=1187 A/C=C COV DCA

M/D=1187 A/C=C COV DCA

M/D=1187 A/C=C COV DCA

M/D=1187 A/C=C COV DCA

M/D=1187 A/C=C COV DCA

M/D=1181 A/C COV DCA

M/D=1181 A/C COV DCA

M/D=1185 A/C=C COV DCA

M/D=1185 A/C=C COV DCA

M/D=1181 A/C COV DCA

M/D=1181 A/C COV DCA

M/D=1185 A/C=C COV DCA

M/D=1185 A/C=C COV DCA

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HCFA COMMON PROCEDURE CODING SYSTEM

L3420 FULL SOLE AND HEEL WEDGE, BETWEEN SOLE
HEELS

L3430 HEEL, COUNTER, PLASTIC REINFORCED

L3440 HEEL, COUNTER, LEATHER REINFORCED

L3450 HEEL, SACH CUSHION TYPE

L3455 HEEL, NEW LEATHER, STANDARD

L3460 HEEL, NEW RUBBER, STANDARD

L3465 HEEL, THOMAS WITH WEDGE

L3470 HEEL, THOMAS EXTENDED TO BALL

L3480 HEEL, PAD AND DEPRESSION FOR SPUR

L3485 HEEL, PAD, REMOVABLE FOR SPUR

MISCELLANEOUS SHOE ADDITIONS

L3500 MISCELLANEOUS SHOE ADDITION, INSOLE, LEATHER

L3510 MISCELLANEOUS SHOE ADDITION, INSOLE, RUBBER

L3520 MISCELLANEOUS SHOE ADDITION, INSOLE, FELT COVERED WITH LEATHER

L3530 MISCELLANEOUS SHOE ADDITION, SOLE, HALF

L3540 MISCELLANEOUS SHOE ADDITION, SOLE, FULL

L3550 MISCELLANEOUS SHOE ADDITION, TOE TAP, STANDARD

L3560 MISCELLANEOUS SHOE ADDITION, TOE TAP, HORSESHOE

L3570 MISCELLANEOUS SHOE ADDITION, SPECIAL EXTENSION TO INSTEP
(LEATHER WITH EYELETS)

L3580 MISCELLANEOUS SHOE ADDITION, CONVERT INSTEP TO VELCRO CLOSURE

L3590 MISCELLANEOUS SHOE ADDITION, CONVERT FIRM SHOE COUNTER TO
SOFT COUNTER

L3595 MISCELLANEOUS SHOE ADDITION, MARCH BAR

M/D=1185 A/C=C COV DCA

M/D=1184 A/C COV DCA

M/D=1185 A/C=C COV DCA

M/D=1185 A/C=C COV DCA

M/D=1185 A/C=C COV DCA

M/D=1185 A/C=C COV DCA

M/D=1185 A/C=C COV DCA

M/D=1185 A/C=C COV DCA

M/D=1185 A/C=C COV DCA

M/D=1185 A/C=C COV DCA

M/D=1187 A/C=C COV DCA

M/D=1187 A/C=C COV DCA

M/D=1187 A/C=C COV DCA

M/D=1187 A/C=C COV DCA

M/D=1187 A/C=C COV DCA

M/D=1187 A/C=C COV DCA

M/D=1187 A/C=C COV DCA

M/D=1187 A/C=C COV DCA

M/D=1187 A/C=C COV DCA

M/D=1187 A/C=C COV DCA

M/D=1187 A/C=C COV DCA

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HCFA COMMON PROCEDURE CODING SYSTEM

TRANSFER OR REPLACEMENT - L3600-L3648

L3600 TRANSFER OF AN ORTHOSIS FROM ONE SHOE TO ANOTHER, CALIPER PLATE, EXISTING

L3610 TRANSFER OF AN ORTHOSIS FROM ONE SHOE TO ANOTHER, CALIPER PLATE, NEW

L3620 TRANSFER OF AN ORTHOSIS FROM ONE SHOE TO ANOTHER, SOLID STIRRUP, EXISTING

L3630 TRANSFER OF AN ORTHOSIS FROM ONE SHOE TO ANOTHER, SOLID STIRRUP, NEW

L3640 TRANSFER OF AN ORTHOSIS FROM ONE SHOE TO ANOTHER, DENNIS BROWNE SPLINT (RIVETON), BOTH SHOES

L3649 UNLISTED PROCEDURES FOR FOOT ORTHOPEDIC SHOES, SHOE MODIFICATIONS AND TRANSFERS

ORTHOTIC DEVICES - UPPER LIMB - L3650-L3999

NOTE: UPPER LIMB

THE PROCEDURES IN THIS SECTION ARE CONSIDERED AS 'BASE' OR 'BASIC PROCEDURES,' AND MAY BE MODIFIED BY LISTING PROCEDURES FROM THE 'ADDITIONS SECTION,' AND ADDING THEM TO THE BASE PROCEDURE.

UPPER LIMB - SHOULDER - L3650 - L3699

L3650 SHOULDER ORTHOSIS, (SD), FIGURE OF "8" DESIGN ABDUCTION RE-STRAINER

L3660 SD, FIGURE OF "8" DESIGN ABDUCTION RESTRAINER, CANVAS AND WEBBING

L3670 SD, ACROMIOLAVICULAR (CANVAS AND WEBBING TYPE)

UPPER LIMB - ELBOW - L3700-L3799

L3700 ELBOW ORTHOSIS (EO), ELASTIC WITH STAYS

L3710 EO, ELASTIC WITH METAL JOINTS

M/D=1187 A/C=C DCA

M/D=1187 A/C=E COV DCA

M/D=1187 A/C=E COV DCA

M/D=1187 A/C=E COV DCA

M/D=1187 A/C=E COV DCA

M/D=1187 A/C=E COV DCA

M/D=1181 A/C COV DCA

M/D=1187 A/C=E COV DCA

M/D=1181 A/C COV DCA

M/D=1181 A/C COV DCA

M/D=1181 A/C COV DCA

M/D=1188 A/C=E COV DCA

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HCFA COMMON PROCEDURE CODING SYSTEM

L3720 ED, DOUBLE UPRIGHT WITH FOREARM/ARM CUFFS, FREE MOTION

L3730 ED, DOUBLE UPRIGHT WITH FOREARM/ARM CUFFS, EXTENSION/
FLEXION ASSISTL3740 ED, DOUBLE UPRIGHT WITH FOREARM/ARM CUFFS, ADJUSTABLE
POSITION LOCK WITH ACTIVE CONTROL

UPPER LIMB - WRIST - HAND - FINGER - L3800-L3959

L3800 WRIST-HAND-FINGER-ORTHOSES (WHFO), SHORT OPPONENS, NO
ATTACHMENTSL3805 WHFO, LONG OPPONENS, NO ATTACHMENT
ADDITIONSL3810 WHFO, ADDITION TO SHORT AND LONG OPPONENS, THUMB ABDUCTION
("C") BARL3815 WHFO, ADDITION TO SHORT AND LONG OPPONENS, SECOND M.P.
ABDUCTION ASSISTL3820 WHFO, ADDITION TO SHORT AND LONG OPPONENS, I.P. EXTENSION
ASSIST, WITH M.P. EXTENSION STOPL3825 WHFO, ADDITION TO SHORT AND LONG OPPONENS, M.P. EXTENSION
STOPL3830 WHFO, ADDITION TO SHORT AND LONG OPPONENS, M.P. EXTENSION
ASSISTL3835 WHFO, ADDITION TO SHORT AND LONG OPPONENS, M.P. SPRING
EXTENSION ASSISTL3840 WHFO, ADDITION TO SHORT AND LONG OPPONENS, SPRING SWIVEL
THUMBL3845 WHFO, ADDITION TO SHORT AND LONG OPPONENS, THUMB I.P.
EXTENSION ASSIST, WITH M.P. STOPL3850 WHFO, ADDITION TO SHORT AND LONG OPPONENS, ACTION WRIST, WITH
DORSIFLEXION ASSISTL3855 WHFO, ADDITION TO SHORT AND LONG OPPONENS, ADJUSTABLE M.P.
FLEXION CONTROL

M/D=1185 A/C=C COV DCA

M/D=1181 A/C COV DCA

M/D=1181 A/C COV DCA

M/D=1181 A/C COV DCA

M/D=1181 A/C COV DCA

M/D=1187 A/C=E COV DCA

M/D=1187 A/C=E COV DCA

M/D=1187 A/C=E COV DCA

M/D=1187 A/C=E COV DCA

M/D=1187 A/C=E COV DCA

M/D=1187 A/C=E COV DCA

M/D=1187 A/C=E COV DCA

M/D=1187 A/C=E COV DCA

M/D=1187 A/C=E COV DCA

M/D=1187 A/C=E COV DCA

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HCFA COMMON PROCEDURE CODING SYSTEM

L3860	WHFO, ADDITION TO SHORT AND LONG OPPOWENS, ADJUSTABLE M.P. FLEXION CONTROL AND I.P.	*	M/D=1187 A/C=C COV	DCA
	DYNAMIC FLEXOR HINGE, RECIPROCAL WRIST EXTENSION/FLEXION, FINGER FLEXION/EXTENSION	*	M/D= 986 A/C=E	DCA
L3900	WHFO, DYNAMIC FLEXOR HINGE, RECIPROCAL WRIST EXTENSION/ FLEXION, FINGER FLEXION/EXTENSION, WRIST OR FINGER DRIVEN	*	M/D= 986 A/C=E COV	DCA
L3901	WHFO, DYNAMIC FLEXOR HINGE, RECIPROCAL WRIST EXTENSION/ FLEXION, FINGER FLEXION/EXTENSION, CABLE DRIVEN	*	M/D=1185 A/C=C COV	DCA
	EXTERNAL POWER	*		
L3902	WHFO, EXTERNAL POWERED, COMPRESSED GAS	*	M/D=1184 A/C	COV DCA
L3904	WHFO, EXTERNAL POWERED, ELECTRIC	*	M/D=1181 A/C	COV DCA
	OTHER WRIST-HAND-FINGER ORTHOSES-CUSTOM FITTED	*		
L3906	WHFO, WRIST GAUNTLET, MOLDED TO PATIENT MODEL	*	M/D=1187 A/C=E COV	DCA
L3907	WHFO, WRIST GAUNTLET WITH THUMB SPICA, MOLDED TO PATIENT MODEL	*	M/D=1187 A/C=A COV	DCA
L3908	WHFO, WRIST EXTENSION CONTROL COCK-UP, CANVAS OR LEATHER DESIGN, NON-MOLDED	*	M/D=1187 A/C=E COV	DCA
L3910	WHFO, SWANSON DESIGN	*	M/D=1181 A/C	COV DCA
L3912	WHFO, FLEXION GLOVE WITH ELASTIC FINGER CONTROL	*	M/D=1181 A/C	COV DCA
L3914	WHFO, WRIST EXTENSION COCK-UP	*	M/D=1187 A/C=E COV	DCA
L3916	WHFO, WRIST EXTENSION COCK-UP, WITH OUTRIGGER	*	M/D=1187 A/C=E COV	DCA
L3918	WHFO, KNUCKLE BENDER	*	M/D=1181 A/C	COV DCA
L3920	WHFO, KNUCKLE BENDER, WITH OUTRIGGER	*	M/D=1181 A/C	COV DCA
L3922	WHFO, KNUCKLE BENDER, TWO SEGMENT TO FLEX JOINTS	*	M/D=1181 A/C	COV DCA
L3924	WHFO, OPPENHEIMER	*	M/D=1181 A/C	COV DCA
L3926	WHFO, THOMAS SUSPENSION	*	M/D=1181 A/C	COV DCA
L3928	WHFO, FINGER EXTENSION, WITH CLOCK SPRING	*	M/D=1181 A/C	COV DCA

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HCFA COMMON PROCEDURE CODING SYSTEM

L3930	WHFO, FINGER EXTENSION, WITH WRIST SUPPORT	*	M/D=1181	A/C	COV	DCA
L3932	WHFO, SAFETY PIN, SPRING WIRE	*	M/D=1181	A/C	COV	DCA
L3934	WHFO, SAFETY PIN, MODIFIED	*	M/D=1181	A/C	COV	DCA
L3936	WHFO, PALMER	*	M/D=1181	A/C	COV	DCA
L3938	WHFO, DORSAL WRIST	*	M/D=1181	A/C	COV	DCA
L3940	WHFO, DORSAL WRIST, WITH OUTRIGGER ATTACHMENT	*	M/D=1181	A/C	COV	DCA
L3942	WHFO, REVERSE KNUCKLE BENDER	*	M/D=1181	A/C	COV	DCA
L3944	WHFO, REVERSE KNUCKLE BENDER, WITH OUTRIGGER	*	M/D=1181	A/C	COV	DCA
L3946	WHFO, COMPOSITE ELASTIC	*	M/D=1181	A/C	COV	DCA
L3948	WHFO, FINGER KNUCKLE BENDER	*	M/D=1181	A/C	COV	DCA
L3950	WHFO, COMBINATION OPPENHEIMER, WITH KNUCKLE BENDER AND TWO ATTACHMENTS	*	M/D=1181	A/C	COV	DCA
L3952	WHFO, COMBINATION OPPENHEIMER, WITH REVERSE KNUCKLE AND TWO ATTACHMENTS	*	M/D=1181	A/C	COV	DCA
L3954	WHFO, SPREADING HAND	*	M/D=1181	A/C	COV	DCA
UPPER LIMB - SHOULDER - ELBOW - WRIST - HAND - L3960-L3979		*				
	ABDUCTION POSITIONING-CUSTOM FITTED	*				
L3960	SHOULDER-ELBOW-WRIST-HAND ORTHOSIS, (SEWHO), ABDUCTION POSITIONING, AIRPLANE DESIGN	*	M/D=1187	A/C=E	COV	DCA
		*	CNTS	RVU=	BR	A/V
L3962	SEWHO, ABDUCTION POSITIONING, ERBS PALSEY DESIGN	*	M/D=1181	A/C	COV	DCA
L3963	SEWHO, MOLDED SHOULDER, ARM, FOREARM, AND WRIST, WITH ARTICULATING ELBOW JOINT	*	M/D=1187	A/C=A	COV	DCA
L3964	SEWHO, MOBILE ARM SUPPORT ATTACHED TO WHEELCHAIR, BALANCED AND FITTED TO PATIENT, ADJUSTABLE	*	M/D=1187	A/C=C	COV	DCA
L3965	SEWHO-RADIAL ARM SUPPORT. ATTACHED TO WHEELCHAIR, BALANCED AND FITTED TO PATIENT, ADJUSTABLE RANCHO TYPE	*	M/D=1185	A/C=C	COV	DCA
L3966	SEWHO, MOBILE ARM SUPPORT ATTACHED TO WHEELCHAIR, BALANCED AND FITTED TO PATIENT, RECLINING	*	M/D=1187	A/C=C	COV	DCA
L3968	SEWHO, MOBILE ARM SUPPORT ATTACHED TO WHEELCHAIR, BALANCED AND FITTED TO PATIENT, FRICTION ARM SUPPORT (FRICTION DAMPENING TO PROXIMAL AND DISTAL JOINTS)	*	M/D=1187	A/C=C	COV	DCA

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HCFA COMMON PROCEDURE CODING SYSTEM

L8969 SEWHO, MOBILE ARM SUPPORT, MONOSUSPENSION ARM AND HAND SUPPORT, OVERHEAD ELBOW
FOREARM HAND SLING SUPPORT, YOKE TYPE ARM SUSPENSION SUPPORT

ADDITIONS TO MOBILE ARM SUPPORTS

L3970 SEWHO, ADDITION TO MOBILE ARM SUPPORT, ELEVATING PROXIMAL ARM

L3972 SEWHO, ADDITION TO MOBILE ARM SUPPORT, OFFSET OR LATERAL
ROCKER ARM WITH ELASTIC BALANCE CONTROL

L3974 SEWHO, ADDITION TO MOBILE ARM SUPPORT, SUPINATOR

UPPER LIMB - FRACTURE ORTHOSES - L3980-L3998

L3980 UPPER EXTREMITY FRACTURE ORTHOSIS, HUMERAL

L3982 UPPER EXTREMITY FRACTURE ORTHOSIS, RADIUS/ULNAR

L3984 UPPER EXTREMITY FRACTURE ORTHOSIS, WRIST

L3985 UPPER EXTREMITY FRACTURE ORTHOSIS, FOREARM, HAND WITH WRIST HINGE

L3986 UPPER EXTREMITY FRACTURE ORTHOSIS, COMBINATION OF
HUMERAL, RADIUS/ULNAR, WRIST, (EXAMPLE--COLLES FRACTURE)

L3995 ADDITION TO UPPER EXTREMITY ORTHOSIS, SOCK, FRACTURE OR EQUAL, EACH

L3999 UNLISTED PROCEDURES FOR UPPER LIMB ORTHOSIS

SPECIFIC REPAIR - L4000-L4199

L4000 REPLACE GIRDLE FOR MILWAUKEE ORTHOSIS

L4010 REPLACE TRILATERAL SOCKET BRIM

L4020 REPLACE QUADRILATERAL SOCKET BRIM, MOLDED TO PATIENT MODEL

L4030 REPLACE QUADRILATERAL SOCKET BRIM, CUSTOM FITTED

L4040 REPLACE MOLDED THIGH LACER

L4045 REPLACE NON-MOLDED THIGH LACER

L4050 REPLACE MOLDED CALF LACER

L4055 REPLACE NON-MOLDED CALF LACER

M/D=1187 A/C=A COV DCA

M/D=1187 A/C=C COV DCA
CNTS RVU= BR A/V

M/D=1187 A/C=C COV DCA

M/D=1187 A/C=C COV DCA

M/D=1187 A/C=C DCA

M/D=1181 A/C COV DCA

M/D=1185 A/C=C COV DCA

M/D=1181 A/C COV DCA

M/D=1187 A/C=A COV DCA

M/D=1185 A/C=C COV DCA

M/D=1188 A/C=A COV DCA

M/D=1181 A/C COV DCA

M/D=1184 A/C COV DCA

M/D=1184 A/C COV DCA

M/D=1184 A/C COV DCA

M/D=1184 A/C COV DCA

M/D=1184 A/C COV DCA

M/D=1187 A/C=A COV DCA

M/D=1184 A/C COV DCA

M/D=1187 A/C=A COV DCA

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HCFA COMMON PROCEDURE CODING SYSTEM

L4060 REPLACE HIGH ROLL CUFF
 L4070 REPLACE PROXIMAL AND DISTAL UPRIGHT FOR KAFO
 L4080 REPLACE METAL BANDS KAFO, PROXIMAL THIGH
 L4090 REPLACE METAL BANDS KAFO-AFO, CALF OR DISTAL THIGH
 L4100 REPLACE LEATHER CUFF KAFO, PROXIMAL THIGH
 L4110 REPLACE LEATHER CUFF KAFO-AFO, CALF OR DISTAL THIGH
 L4130 REPLACE PRETIBIAL SHELL
 REPAIRS - L4200-L4299

L4200 REPAIR OF ORTHOTIC DEVICE, HOURLY RATE

L4210 REPAIR OF ORTHOTIC DEVICE, REPAIR OR REPLACE MINOR PARTS

ANCILLARY ORTHOTIC SERVICES (L4300 - L4400)

L4310 MULTI-PODUS OR EQUAL ORTHOTIC PREPARATORY MANAGEMENT SYSTEM FOR LOWER EXTREMITIES

L4320 ADDITION TO AFO, MULTI-PODUS (OR EQUAL) ORTHOTIC PREPARATORY MANAGEMENT SYSTEM FOR LOWER EXTREMITIES, FLEXIBLE FOOT POSITIONER WITH SOFT INTERFACE FOR AFO, WITH VELCRO CLOSURE, CUSTOM FITTED
 L4350 PNEUMATIC ANKLE CONTROL SPLINT (AIRCRAFT OR EQUAL)

L4360 PNEUMATIC WALKING SPLINT (AIRCRAFT OR EQUAL)

L4370 PNEUMATIC FULL LEG SPLINT (AIRCRAFT OR EQUAL)

L4380 PNEUMATIC KNEE SPLINT (AIRCRAFT OR EQUAL)

*	M/D=1184	A/C	COV	DCA
*	M/D=1187	A/C=E	COV	DCA
*	M/D=1187	A/C=E	COV	DCA
*	M/D=1184	A/C	COV	DCA
*	M/D=1187	A/C=C	COV	DCA
*	M/D=1184	A/C	COV	DCA
*	M/D=1183	A/C	COV	DCA
*				
*	M/D=1189	A/C=F	COV=D	DCA
*	MCN	2133	2100.4	2130D
*	M/D=1189	A/C=F	COV=D	DCA
*	MCN	2133	2100.4	2130D
*	M/D=1188	A/C=A		DCA
*	M/D=1188	A/C=A	COV	DCA
*	M/D=1188	A/C=A	COV	DCA
*	M/D=1188	A/C=A	COV	DCA
*	M/D=1188	A/C=A	COV	DCA
*	M/D=1188	A/C=A	COV	DCA

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PROSTHETIC PROCEDURES - L5000-L9999

LOWER LIMB L5000 - L5999

NOTE: LOWER LIMB

THE PROCEDURES IN THIS SECTION ARE CONSIDERED AS 'BASE'
OR 'BASIC PROCEDURES,' AND MAY BE MODIFIED BY LISTING ITEMS/
PROCEDURES OR SPECIAL MATERIALS FROM THE 'ADDITIONS SECTION,'
AND ADDING THEM TO THE BASE PROCEDURE.
LOWER LIMB - PARTIAL FOOT - L5000 - L5049

L5000 PARTIAL FOOT, SHOE INSERT WITH LONGITUDINAL ARCH, TOE FILLER

L5010 PARTIAL FOOT, MOLDED SOCKET, ANKLE HEIGHT, WITH TOE FILLER

L5020 PARTIAL FOOT, MOLDED SOCKET, TIBIAL TUBERCLE HEIGHT, WITH TOE FILLER

LOWER LIMB - ANKLE - L5050-L5099

L5050 ANKLE, SYMES, MOLDED SOCKET, SACH FOOT

L5060 ANKLE, SYMES, METAL FRAME, MOLDED LEATHER SOCKET,
ARTICULATED ANKLE/FOOT

LOWER LIMB - BELOW KNEE - L5100-L5149

L5100 BELOW KNEE, MOLDED SOCKET, SHIN, SACH FOOT

L5105 BELOW KNEE, PLASTIC SOCKET, JOINTS AND THIGH LACER, SACH FOOT

L5110 BELOW KNEE, WOOD SOCKET, JOINTS AND THIGH LACER, SACH FOOT

LOWER LIMB - KNEE DISARTICULATION - L5150-L5199

L5150 KNEE DISARTICULATION (OR THROUGH KNEE), MOLDED SOCKET, EXTERNAL
KNEE JOINTS, SHIN, SACH FOOTL5160 KNEE DISARTICULATION (OR THROUGH KNEE), MOLDED SOCKET, BENT KNEE
CONFIGURATION, EXTERNAL KNEE JOINTS, SHIN, SACH FOOT

LOWER LIMB - ABOVE KNEE - L5200-L5249

M/D=1187	A/C=C		DCA
M/D=1187	A/C=C		DCA

M/D=1181	A/C	COV	DCA
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M/D=1181	A/C	COV	DCA
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M/D=1181	A/C	COV	DCA
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M/D=1184	A/C	COV	DCA
----------	-----	-----	-----

M/D=1184	A/C	COV	DCA
----------	-----	-----	-----

M/D=1181	A/C	COV	DCA
----------	-----	-----	-----

M/D=1188	A/C=A	COV	DCA
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M/D=1188	A/C=D	COV	DCA
XR1=L5639	XR2		XR3

M/D=1181	A/C	COV	DCA
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M/D=1181	A/C	COV	DCA
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6 ABOVE KNEE, MOLDED SOCKET, SINGLE AXIS CONSTANT FRICTION KNEE, SHIN, SACH FOOT

ABOVE KNEE, SHORT PROSTHESIS, NO KNEE JOINT ("STUBBIES"), WITH FOOT BLOCKS, NO ANKLE JOINTS, EACH

L5270 ABOVE KNEE, SHORT PROSTHESIS, NO KNEE JOINT ("STUBBIES"), WITH ARTICULATED ANKLE/FOOT, DYNAMICALLY ALIGNED, EACH

L5280 ABOVE KNEE, FOR PROXIMAL FEMORAL FOCAL DEFICIENCY, CONSTANT FRICTION KNEE, SHIN, SACH FOOT

LOWER LIMB - HIP DISARTICULATION - L5250-L5279

L5290 HIP DISARTICULATION, CANADIAN TYPE: MOLDED SOCKET, HIP JOINT, SINGLE AXIS CONSTANT FRICTION KNEE, SHIN, SACH FOOT

L5270 HIP DISARTICULATION, TILT TABLE TYPE: MOLDED SOCKET, LOCKING HIP JOINT, SINGLE AXIS CONSTANT FRICTION KNEE, SHIN, SACH FOOT

LOWER LIMB - HEMIPELVECTOMY - L5280-L5299

L5280 HEMIPELVECTOMY, CANADIAN TYPE: MOLDED SOCKET, HIP JOINT, SINGLE AXIS CONSTANT FRICTION KNEE, SHIN, SACH FOOT

LOWER LIMB - ENDOSKELETAL - BELOW KNEE - L5300 - L5309

L5300 BELOW KNEE, MOLDED SOCKET, SACH FOOT, ENDOSKELETAL SYSTEM, INCLUDING SOFT COVER AND FINISHING

LOWER LIMB - ENDOSKELETAL - KNEE DISARTICULATION - L5310-L5319

L5310 KNEE DISARTICULATION (OR THROUGH KNEE), MOLDED SOCKET, SACH FOOT ENDOSKELETAL SYSTEM, INCLUDING SOFT COVER AND FINISHING

LOWER LIMB - ENDOSKELETAL - ABOVE KNEE - L5320-L5329

L5320 ABOVE KNEE, MOLDED SOCKET, OPEN END, SACH FOOT, ENDOSKELETAL SYSTEM, SINGLE AXIS KNEE, INCLUDING SOFT COVER AND FINISHING

LOWER LIMB - ENDOSKELETAL - HIP DISARTICULATION - L5330-L5339

M/D=1181 A/C COV DCA

M/D=1181 A/C COV DCA

M/D=1181 A/C COV DCA

M/D=1181 A/C COV DCA

M/D=1181 A/C COV DCA

M/D=1181 A/C COV DCA

M/D=1181 A/C COV DCA

M/D=1185 A/C=C COV DCA

M/D=1181 A/C COV DCA

M/D=1181 A/C COV DCA

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L5330 HIP DISARTICULATION, CANADIAN TYPE; MOLDED SOCKET, ENDO-SKELETAL SYSTEM, HIP JOINT, SINGLE AXIS KNEE, SACH FOOT, INCLUDING SOFT COVER AND FINISHING

LOWER LIMB - ENDOSKELETAL - HEMIPELVECTOMY - L5340-L5349

L5340 HEMIPELVECTOMY, CANADIAN TYPE; MOLDED SOCKET, ENDOSKELETAL SYSTEM, HIP JOINT, SINGLE AXIS KNEE, SACH FOOT, INCLUDING SOFT COVER AND FINISHING

IMMEDIATE - EARLY - INITIAL - PREPARATORY PROCEDURES - L5400 - L5999

IMMEDIATE POST SURGICAL OR EARLY FITTING PROCEDURES - L5400-L5499

L5400 IMMEDIATE POST SURGICAL OR EARLY FITTING, APPLICATION OF INITIAL RIGID DRESSING, INCLUDING FITTING, ALIGNMENT, SUSPENSION, AND ONE CAST CHANGE, BELOW KNEE

L5410 IMMEDIATE POST SURGICAL OR EARLY FITTING, APPLICATION OF INITIAL RIGID DRESSING, INCLUDING FITTING, ALIGNMENT AND SUSPENSION, BELOW KNEE, EACH ADDITIONAL CAST CHANGE AND REALIGNMENT

L5420 IMMEDIATE POST SURGICAL OR EARLY FITTING, APPLICATION OF INITIAL RIGID DRESSING, INCLUDING FITTING, ALIGNMENT AND SUSPENSION AND ONE CAST CHANGE "AK" OR KNEE DISARTICULATION

L5430 IMMEDIATE POST SURGICAL OR EARLY FITTING, APPLICATION OF INITIAL RIGID DRESSING, INCL. FITTING, ALIGNMENT AND SUSPENSION, "AK" OR KNEE DISARTICULATION, EACH ADDITIONAL CAST CHANGE AND REALIGNMENT

L5450 IMMEDIATE POST SURGICAL OR EARLY FITTING, APPLICATION OF NON-WEIGHT BEARING RIGID DRESSING, BELOW KNEE

L5460 IMMEDIATE POST SURGICAL OR EARLY FITTING, APPLICATION OF NON-WEIGHT BEARING RIGID DRESSING, ABOVE KNEE

INITIAL PROSTHESIS - L5500 - L5509

L5500 INITIAL, BELOW KNEE "PTB" TYPE SOCKET, "USMC" OR EQUAL PYLON, NO COVER, SACH FOOT, PLASTER SOCKET, DIRECT FORMED

L5505 INITIAL, ABOVE KNEE - KNEE DISARTICULATION, ISCHIAL LEVEL SOCKET, "USMC" OR EQUAL PYLON, NO COVER, SACH FOOT PLASTER SOCKET, DIRECT FORMED

M/D=1185 A/C=C COV DCA

M/D=1184 A/C COV DCA

M/D=1181 A/C COV DCA

M/D=1187 A/C=C COV DCA

M/D=1181 A/C COV DCA

M/D= 986 A/C=E COV DCA

M/D=1181 A/C COV DCA

M/D=1181 A/C COV DCA

M/D=1187 A/C=C COV DCA

M/D=1187 A/C=C COV DCA

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PREPARATORY PROSTHESIS- L5510 - L5599

L5510	PREPARATORY, BELOW KNEE "PTB" TYPE SOCKET, "USMC" OR EQUAL PYLON, NO COVER, SACH FOOT, PLASTER SOCKET, MOLDED TO MODEL	M/D=1187 A/C=C COV	DCA
L5520	PREPARATORY, BELOW KNEE "PTB" TYPE SOCKET, "USMC" OR EQUAL PYLON, NO COVER, SACH FOOT, THERMOPLASTIC OR EQUAL, DIRECT FORMED	M/D=1187 A/C=C COV	DCA
L5530	PREPARATORY, BELOW KNEE "PTB" TYPE SOCKET, "USMC" OR EQUAL PYLON, NO COVER, SACH FOOT, THERMOPLASTIC OR EQUAL, MOLDED TO MODEL	M/D=1187 A/C=C COV	DCA
L5535	PREPARATORY, BELOW KNEE "PTB" TYPE SOCKET, USMC OR EQUAL PYLON, NO COVER, SACH FOOT, PREFABRICATED, ADJUSTABLE OPEN END SOCKET	M/D=1188 A/C=A COV	DCA
L5540	PREPARATORY, BELOW KNEE "PTB" TYPE SOCKET, "USMC" OR EQUAL PYLON, NO COVER, SACH FOOT, LAMINATED SOCKET, MOLDED TO MODEL	M/D=1187 A/C=C COV	DCA
L5560	PREPARATORY, ABOVE KNEE- KNEE DISARTICULATION, ISCHIAL LEVEL SOCKET, "USMC" OR EQUAL PYLON, NO COVER, SACH FOOT, PLASTER SOCKET, MOLDED TO MODEL	M/D=1187 A/C=C COV	DCA
L5570	PREPARATORY, ABOVE KNEE-KNEE DISARTICULATION, ISCHIAL LEVEL SOCKET, "USMC" OR EQUAL PYLON, NO COVER, SACH FOOT, THERMOPLASTIC OR EQUAL, DIRECT FORMED	M/D=1187 A/C=C COV	DCA
L5580	PREPARATORY, ABOVE KNEE-KNEE DISARTICULATION ISCHIAL LEVEL SOCKET, "USMC" OR EQUAL PYLON, NO COVER, SACH FOOT, THERMOPLASTIC OR EQUAL, MOLDED TO MODEL	M/D=1187 A/C=C COV	DCA
L5585	PREPARATORY, ABOVE KNEE-KNEE DISARTICULATION, ISCHIAL LEVEL SOCKET, "USMC" OR EQUAL PYLON, NO COVER, SACH FOOT, PREFABRICATED ADJUSTABLE OPEN END SOCKET	M/D=1187 A/C=A COV	DCA
L5590	PREPARATORY, ABOVE KNEE-KNEE DISARTICULATION ISCHIAL LEVEL SOCKET, "USMC" OR EQUAL PYLON NO COVER, SACH FOOT, LAMINATED SOCKET, MOLDED TO MODEL	M/D=1187 A/C=C COV	DCA
L5595	PREPARATORY, HIP DISARTICULATION-HEMIPELVECTOMY, PYLON, NO COVER, SACH FOOT, THERMOPLASTIC OR EQUAL, MOLDED TO PATIENT MODEL	M/D=1188 A/C=A COV	DCA
ADDITIONS TO LOWER EXTREMITY - L5600-L5749			
L5600	PREPARATORY, HIP DISARTICULATION-HEMIPELVECTOMY, PYLON, NO COVER, SACH FOOT, LAMINATED SOCKET, MOLDED TO PATIENT MODEL	M/D=1188 A/C=A COV	DCA
L5610	ADDITION TO LOWER EXTREMITY, ABOVE KNEE, HYDRACADENCE SYSTEM	M/D=1187 A/C=E COV	DCA

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L5611 ADDITION TO LOWER EXTREMITY, ABOVE KNEE-KNEE DISARTICULATION, OHC 4-BAR LINKAGE, WITH FRICTION SWING PHASE CONTROL

L5612 ADDITIONS TO LOWER EXTREMITY, ABOVE KNEE, POLYCADENCE

L5613 ADDITION TO LOWER EXTREMITY, ABOVE KNEE-KNEE DISARTICULATION, OHC 4-BAR LINKAGE, WITH HYDRAULIC SWING PHASE CONTROL

L5614 ADDITIONS TO LOWER EXTREMITY, ABOVE KNEE, LAWRENCE POLYCENTRIC

L5616 ADDITION TO LOWER EXTREMITY, ABOVE KNEE, UNIVERSAL MULTIPLEX SYSTEM, FRICTION SWING PHASE CONTROL

ADDITIONS - TEST SOCKETS - L5618-L5629

L5618 ADDITION TO LOWER EXTREMITY, TEST SOCKET, SYMES

L5620 ADDITION TO LOWER EXTREMITY, TEST SOCKET, BELOW KNEE

L5622 ADDITION TO LOWER EXTREMITY, TEST SOCKET, KNEE DISARTICULATION

L5624 ADDITION TO LOWER EXTREMITY, TEST SOCKET, ABOVE KNEE

L5626 ADDITION TO LOWER EXTREMITY, TEST SOCKET, HIP DISARTICULATION

L5628 ADDITION TO LOWER EXTREMITY, TEST SOCKET, HEMIPELVECTOMY

L5629 ADDITION TO LOWER EXTREMITY, BELOW KNEE, ACRYLIC SOCKET

ADDITIONS - SOCKET VARIATIONS - L5630-L5653

L5630 ADDITION TO LOWER EXTREMITY, SYMES TYPE, EXPANDABLE WALL SOCKET

L5631 ADDITION TO LOWER EXTREMITY, ABOVE KNEE OR KNEE DISARTICULATION, ACRYLIC SOCKET

L5632 ADDITION TO LOWER EXTREMITY, SYMES TYPE, "PTB" BRIM DESIGN SOCKET

L5634 ADDITION TO LOWER EXTREMITY, SYMES TYPE, POSTERIOR OPENING (CANADIAN) SOCKET

L5636 ADDITION TO LOWER EXTREMITY, SYMES TYPE, MEDIAL OPENING SOCKET

L5637 ADDITION TO LOWER EXTREMITY, BELOW KNEE, TOTAL CONTACT

M/D=1188 A/C=A COV DCA

M/D=1187 A/C=D COV DCA

M/D=1188 A/C=A COV DCA

M/D=1187 A/C=D COV DCA

M/D=1187 A/C=E COV DCA

M/D=1187 A/C=E COV DCA

M/D=1187 A/C=E COV DCA

M/D=1187 A/C=E COV DCA

M/D=1187 A/C=E COV DCA

M/D=1187 A/C=E COV DCA

M/D=1187 A/C=E COV DCA

M/D=1188 A/C=A COV DCA

M/D=1187 A/C=E COV DCA

M/D=1188 A/C=A COV DCA

M/D=1187 A/C=E COV DCA

M/D=1187 A/C=E COV DCA

M/D=1187 A/C=E COV DCA

M/D=1188 A/C=A COV DCA

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HCFA COMMON PROCEDURE CODING SYSTEM

L5638	ADDITION TO LOWER EXTREMITY, BELOW KNEE, LEATHER SOCKET	*	M/D=1187 A/C=E COV	DCA
L5639	ADDITION TO LOWER EXTREMITY, BELOW KNEE, WOOD SOCKET	*	M/D=1188 A/C=A COV	DCA
L5640	ADDITION TO LOWER EXTREMITY, KNEE DISARTICULATION, LEATHER SOCKET	*	M/D=1187 A/C=E COV	DCA
L5642	ADDITION TO LOWER EXTREMITY, ABOVE KNEE, LEATHER SOCKET	*	M/D=1187 A/C=E COV	DCA
L5643	ADDITION TO LOWER EXTREMITY, HIP DISARTICULATION, FLEXIBLE INNER SOCKET, EXTERNAL FRAME	*	M/D=1187 A/C=A COV	DCA
L5644	ADDITION TO LOWER EXTREMITY, ABOVE KNEE, WOOD SOCKET	*	M/D=1187 A/C=E COV	DCA
L5645	ADDITION TO LOWER EXTREMITY, BELOW KNEE, FLEXIBLE INNER SOCKET, EXTERNAL FRAME	*	M/D=1187 A/C=A COV	DCA
L5646	ADDITION TO LOWER EXTREMITY, BELOW KNEE, AIR CUSHION SOCKET	*	M/D=1187 A/C=E COV	DCA
L5647	ADDITION TO LOWER EXTREMITY, BELOW KNEE SUCTION SOCKET	*	M/D=1187 A/C=A COV	DCA
L5648	ADDITION TO LOWER EXTREMITY, ABOVE KNEE, AIR CUSHION SOCKET	*	M/D=1187 A/C=E COV	DCA
L5649	ADDITION TO LOWER EXTREMITY, ISCHIAL CONTAINMENT/NARROW M-L SOCKET	*	M/D=1188 A/C=C COV	DCA
L5650	ADDITIONS TO LOWER EXTREMITY, TOTAL CONTACT, ABOVE KNEE OR KNEE DISARTICULATION SOCKET	*	M/D=1184 A/C=C COV	DCA
L5651	ADDITION TO LOWER EXTREMITY, ABOVE KNEE, FLEXIBLE INNER SOCKET, EXTERNAL FRAME	*	M/D=1187 A/C=A COV	DCA
L5652	ADDITION TO LOWER EXTREMITY, SUCTION SUSPENSION, ABOVE KNEE OR KNEE DISARTICULATION SOCKET	*	M/D=1187 A/C=E COV	DCA
L5653	ADDITION TO LOWER EXTREMITY, KNEE DISARTICULATION, EXPANDABLE WALL SOCKET	*	M/D=1187 A/C=E COV	DCA
ADDITIONS - SOCKET INSERT AND SUSPENSION - L5654-L5699				
L5654	ADDITION TO LOWER EXTREMITY, SOCKET INSERT, SYMES, (KEMBL0, PELITE, ALIPLAST, PLASTAZOTE OR EQUAL)	*	M/D=1187 A/C=E COV	DCA
L5655	ADDITION TO LOWER EXTREMITY, SOCKET INSERT, BELOW KNEE (KEMBL0, PELITE, ALIPLAST, PLASTAZOTE OR EQUAL)	*	M/D=1187 A/C=E COV	DCA
L5656	ADDITION TO LOWER EXTREMITY, SOCKET INSERT, KNEE DISARTICULATION (KEMBL0, PELITE, ALIPLAST, PLASTAZOTE OR EQUAL)	*	M/D=1187 A/C=C COV	DCA
L5658	ADDITION TO LOWER EXTREMITY, SOCKET INSERT, ABOVE KNEE (KEMBL0, PELITE, ALIPLAST, PLASTAZOTE OR EQUAL)	*	M/D=1187 A/C=E COV	DCA

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L5660	ADDITION TO LOWER EXTREMITY, SOCKET INSERT, SYMES, SILICONE GEL OR EQUAL	M/D=1187 A/C=E COV	DCA
L5661	ADDITION TO LOWER EXTREMITY, SOCKET INSERT, MULTI-DUROMETER SYMES	M/D=1187 A/C=A COV	DCA
L5662	ADDITION TO LOWER EXTREMITY, SOCKET INSERT, BELOW KNEE, SILICONE GEL OR EQUAL	M/D=1187 A/C=E COV	DCA
L5663	ADDITION TO LOWER EXTREMITY, SOCKET INSERT, KNEE DISARTICULATION, SILICONE GEL OR EQUAL	M/D=1187 A/C=E COV	DCA
L5664	ADDITION TO LOWER EXTREMITY, SOCKET INSERT, ABOVE KNEE, SILICONE GEL OR EQUAL	M/D=1187 A/C=E COV	DCA
L5665	ADDITION TO LOWER EXTREMITY, SOCKET INSERT, MULTI-DUROMETER, BELOW KNEE	M/D=1187 A/C=A COV	DCA
L5666	ADDITION TO LOWER EXTREMITY, BELOW KNEE, CUFF SUSPENSION	M/D=1187 A/C=E COV	DCA
L5668	ADDITION TO LOWER EXTREMITY, BELOW KNEE, MOLDED DISTAL CUSHION	M/D=1187 A/C=E COV	DCA
L5670	ADDITION TO LOWER EXTREMITY, BELOW KNEE, MOLDED SUPRACONDYLAR SUSPENSION ("PTS" OR SIMILAR)	M/D=1187 A/C=E COV	DCA
L5672	ADDITION TO LOWER EXTREMITY, BELOW KNEE, REMOVABLE MEDIAL BRIM SUSPENSION	M/D=1187 A/C=E COV	DCA
L5674	ADDITION TO LOWER EXTREMITY, BELOW KNEE, LATEX SLEEVE SUSPENSION OR EQUAL, EACH	M/D=1187 A/C=C COV	DCA
L5675	ADDITION TO LOWER EXTREMITY, BELOW KNEE, LATEX SLEEVE SUSPENSION OR EQUAL, HEAVY DUTY, EACH	M/D=1187 A/C=A COV	DCA
L5676	ADDITIONS TO LOWER EXTREMITY, BELOW KNEE, KNEE JOINTS, SINGLE AXIS, PAIR	M/D=1187 A/C=C COV	DCA
L5677	ADDITIONS TO LOWER EXTREMITY, BELOW KNEE, KNEE JOINTS, POLYCENTRIC, PAIR	M/D=1187 A/C=A COV	DCA
L5678	ADDITIONS TO LOWER EXTREMITY, BELOW KNEE, JOINT COVERS, PAIR	M/D=1185 A/C=C COV	DCA
L5680	ADDITION TO LOWER EXTREMITY, BELOW KNEE, THIGH LACER, NON-MOLDED	M/D=1187 A/C=E COV	DCA
L5682	ADDITION TO LOWER EXTREMITY, BELOW KNEE, THIGH LACER, GLUTEAL/ISCHIAL, MOLDED	M/D=1187 A/C=E COV	DCA
L5684	ADDITION TO LOWER EXTREMITY, BELOW KNEE, FORK STRAP	M/D=1187 A/C=E COV	DCA
L5686	ADDITION TO LOWER EXTREMITY, BELOW KNEE, BACK CHECK (EXTENSION CONTROL)	M/D=1187 A/C=E COV	DCA

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HCFA COMMON PROCEDURE CODING SYSTEM

L5688 ADDITION TO LOWER EXTREMITY, BELOW KNEE, WAIST BELT, WEBBING
 L5690 ADDITION TO LOWER EXTREMITY, BELOW KNEE, WAIST BELT, PADDED
 AND LINED
 L5692 ADDITION TO LOWER EXTREMITY, ABOVE KNEE, PELVIC CONTROL BELT,
 LIGHT
 L5694 ADDITION TO LOWER EXTREMITY, ABOVE KNEE, PELVIC CONTROL BELT,
 PADDED AND LINED
 L5695 ADDITION TO LOWER EXTREMITY, ABOVE KNEE, PELVIC CONTROL, SLEEVE
 SUSPENSION, NEOPRENE OR EQUAL, EACH
 L5696 ADDITION TO LOWER EXTREMITY, ABOVE KNEE OR KNEE DISARTICULATION,
 PELVIC JOINT
 L5697 ADDITION TO LOWER EXTREMITY, ABOVE KNEE OR KNEE DISARTICULATION,
 PELVIC BAND
 L5698 ADDITION TO LOWER EXTREMITY, ABOVE KNEE OR KNEE DISARTICULATION,
 SILESIA BANDAGE
 L5699 ALL LOWER EXTREMITY PROSTHESES, SHOULDER HARNESS
 ADDITIONS - FEET - ANKLE UNITS L5700-L5709
 L5700 ALL LOWER EXTREMITY PROSTHESES, FOOT, EXTERNAL KEEL, SACH FOOT
 L5701 ALL LOWER EXTREMITY PROSTHESES, SAFE FOOT
 L5702 ALL LOWER EXTREMITY PROSTHESES, FOOT, SINGLE AXIS ANKLE/FOOT
 L5703 ALL LOWER EXTREMITY PROSTHESES, ENERGY STORING FOOT (SEATTLE,
 STEN, CARBON COPY II OR EQUAL)
 L5704 ALL LOWER EXTREMITY PROSTHESES, FOOT, MULTIAXIAL ANKLE/FOOT
 (GREISSINGER OR EQUAL)
 L5705 ALL LOWER EXTREMITY PROSTHESES, FLEX FOOT SYSTEM
 L5706 ALL EXOSKELETAL LOWER EXTREMITY PROSTHESES, AXIAL ROTATION UNIT
 L5707 ALL ENDSKELETAL LOWER EXTREMITY PROSTHESES, AXIAL ROTATION UNIT

M/D=1187 A/C=E COV DCA
 M/D=1187 A/C=E COV DCA
 M/D=1187 A/C=E COV DCA
 M/D=1187 A/C=E COV DCA
 M/D=1188 A/C=A COV DCA
 M/D=1187 A/C=E COV DCA
 M/D=1187 A/C=E COV DCA
 M/D=1187 A/C=E COV DCA
 M/D=1187 A/C=E COV DCA
 M/D=1187 A/C=E COV DCA
 M/D=1187 A/C=E COV DCA
 M/D=1188 A/C=D COV DCA
 XR1=5970 XR2 XR3
 M/D=1188 A/C=D COV DCA
 XR1=L5972 XR2 XR3
 M/D=1188 A/C=D COV DCA
 XR1=L5974 XR2 XR3
 M/D=1188 A/C=D COV DCA
 XR1=L5976 XR2 XR3
 M/D=1188 A/C=D COV DCA
 XR1=L5978 XR2 XR3
 M/D=1188 A/C=D COV DCA
 XR1=L5980 XR2 XR3
 M/D=1188 A/C=D COV DCA
 XR1=L5982 XR2 XR3
 M/D=1188 A/C=D COV DCA
 XR1=L5984 XR2 XR3

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HCFA COMMON PROCEDURE CODING SYSTEM

L5708 ALL LOWER EXTREMITY PROSTHESIS, AXIAL ROTATION UNIT (RANCHO/USMC
HOSMER, OR EQUAL)

L5709 ALL LOWER EXTREMITY PROSTHESES, MULTI-AXIAL ROTATION UNIT
('MCP' OR EQUAL)

ADDITIONS - KNEE-SHIN SYSTEM L5710 - L5999

EXOSKELETAL L5710-L5780

L5710 ADDITION, EXOSKELETAL KNEE-SHIN SYSTEM, SINGLE AXIS, MANUAL LOCK

L5711 ADDITIONS EXOSKELETAL KNEE-SHIN SYSTEM, SINGLE AXIS, MANUAL LOCK, ULTRA-LIGHT
MATERIAL

L5712 ADDITION, EXOSKELETAL KNEE-SHIN SYSTEM, SINGLE AXIS, FRICTION SWING
AND STANCE PHASE CONTROL (SAFETY KNEE)

L5714 ADDITION, EXOSKELETAL KNEE-SHIN SYSTEM, SINGLE AXIS, VARIABLE FRICTION
SWING PHASE CONTROL

L5716 ADDITION, EXOSKELETAL KNEE-SHIN SYSTEM, POLYCENTRIC, MECHANICAL
STANCE PHASE LOCK

L5718 ADDITION, EXOSKELETAL KNEE-SHIN SYSTEM, POLYCENTRIC, FRICTION SWING
AND STANCE PHASE CONTROL

L5722 ADDITION, EXOSKELETAL KNEE-SHIN SYSTEM, SINGLE AXIS, PNEUMATIC SWING,
FRICTION STANCE PHASE CONTROL

L5724 ADDITION, EXOSKELETAL KNEE-SHIN SYSTEM, SINGLE AXIS, FLUID SWING PHASE
CONTROL

L5726 ADDITION, EXOSKELETAL KNEE-SHIN SYSTEM, SINGLE AXIS, EXTERNAL JOINTS
FLUID SWING PHASE CONTROL

L5728 ADDITION, EXOSKELETAL KNEE-SHIN SYSTEM, SINGLE AXIS, FLUID SWING
AND STANCE PHASE CONTROL

L5780 ADDITION, EXOSKELETAL KNEE-SHIN SYSTEM, SINGLE AXIS, PNEUMATIC/HYDRA
PNEUMATIC SWING PHASE CONTROL

COMPONENT MODIFICATION

L5785 ADDITION, EXOSKELETAL SYSTEM, BELOW KNEE, ULTRA-LIGHT MATERIAL
(TITANIUM, CARBON FIBER OR EQUAL)

L5790 ADDITION, EXOSKELETAL SYSTEM, ABOVE KNEE, ULTRA-LIGHT MATERIAL
(TITANIUM, CARBON FIBER OR EQUAL)

M/D=1187 A/C=D COV DCA
XR1=L5706 XR2=L5707 XRS

M/D=1188 A/C=D COV DCA
XR1=L5986 XR2 XRS

M/D=1187 A/C=A DCA

M/D=1187 A/C=A DCA

M/D=1187 A/C=C COV DCA

M/D=1187 A/C=A COV DCA

M/D=1187 A/C=C COV DCA

M/D=1187 A/C=C COV DCA

M/D=1187 A/C=C COV DCA

M/D=1187 A/C=C COV DCA

M/D=1187 A/C=C COV DCA

M/D=1187 A/C=C COV DCA

M/D=1187 A/C=C COV DCA

M/D=1187 A/C=C COV DCA

M/D=1187 A/C=C COV DCA

M/D=1188 A/C=A DCA

M/D=1187 A/C=A COV DCA

M/D=1187 A/C=A COV DCA

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L5795 ADDITION, EXOSKELETAL SYSTEM, HIP DISARTICULATION, ULTRA-LIGHT MATERIAL
(TITANIUM, CARBON FIBER OR EQUAL)

ENDOSKELETAL L5810-L5998

L5810 ADDITION, ENDOSKELETAL KNEE-SHIN SYSTEM, SINGLE AXIS, MANUAL LOCK

L5811 ADDITION, ENDOSKELETAL KNEE-SHIN SYSTEM, SINGLE AXIS, MANUAL LOCK,
ULTRA-LIGHT MATERIAL

L5812 ADDITION, ENDOSKELETAL KNEE-SHIN SYSTEM, SINGLE AXIS, FRICTION SWING
AND STANCE PHASE CONTROL (SAFETY KNEE)

L5814 ADDITION, ENDOSKELETAL KNEE-SHIN SYSTEM, SINGLE AXIS, VARIABLE FRICTION
SWING PHASE CONTROL

L5816 ADDITION, ENDOSKELETAL KNEE-SHIN SYSTEM, POLYCENTRIC, MECHANICAL STANCE
PHASE LOCK

L5818 ADDITION, ENDOSKELETAL KNEE-SHIN SYSTEM, POLYCENTRIC, FRICTION SWING,
AND STANCE PHASE CONTROL

L5822 ADDITION, ENDOSKELETAL KNEE-SHIN SYSTEM, SINGLE AXIS, PNEUMATIC SWING,
FRICTION STANCE PHASE CONTROL

L5824 ADDITION, ENDOSKELETAL KNEE-SHIN SYSTEM, SINGLE AXIS, FLUID SWING
PHASE CONTROL

L5828 ADDITION, ENDOSKELETAL KNEE-SHIN SYSTEM, SINGLE AXIS, FLUID SWING AND
STANCE PHASE CONTROL

L5830 ADDITION, ENDOSKELETAL KNEE-SHIN SYSTEM, SINGLE AXIS, PNEUMATIC/
SWING PHASE CONTROL

L5850 ADDITION, ENDOSKELETAL SYSTEM, ABOVE KNEE OR HIP DISARTICULATION,
KNEE EXTENSION ASSIST

L5910 ADDITION, ENDOSKELETAL SYSTEM, BELOW KNEE, ALIGNABLE SYSTEM

L5920 ADDITION, ENDOSKELETAL SYSTEM, ABOVE KNEE OR HIP DISARTICULATION, ALIGNABLE
SYSTEM

L5940 ADDITION, ENDOSKELETAL SYSTEM, BELOW KNEE, ULTRA-LIGHT MATERIAL
(TITANIUM, CARBON FIBER OR EQUAL)

L5950 ADDITION, ENDOSKELETAL SYSTEM, ABOVE KNEE, ULTRA-LIGHT MATERIAL (TITANIUM,
CARBON FIBER OR EQUAL)

L5960 ADDITION, ENDOSKELETAL SYSTEM, HIP DISARTICULATION, ULTRA-LIGHT MATERIAL
(TITANIUM, CARBON FIBER OR EQUAL)

M/D=1187 A/C=A COV DCA

M/D=1187 A/C=A DCA

M/D=1187 A/C=A COV DCA

M/D=1187 A/C=A COV DCA

M/D=1187 A/C=A COV DCA

M/D=1187 A/C=D COV DCA

M/D=1187 A/C=A COV DCA

M/D=1187 A/C=A COV DCA

M/D=1187 A/C=A COV DCA

M/D=1187 A/C=A COV DCA

M/D=1187 A/C=A COV DCA

M/D=1187 A/C=C COV DCA

M/D=1187 A/C=A COV DCA

M/D=1187 A/C=A COV DCA

M/D=1187 A/C=A COV DCA

M/D=1187 A/C=A COV DCA

M/D=1187 A/C=A COV DCA

M/D=1187 A/C=A COV DCA

HCEA COMMON PROCEDURE CODING SYSTEM

[illegible]

M/D=11B1	A/C= A	CDV	DCA
M/D=11B1	A/C	CDV	DCA
M/D=11B1	A/C	CDV	DCA
M/D=11B1	A/C	CDV	DCA
M/D=11B1	A/C	CDV	DCA
M/D=11B7	A/C= A	CDV	DCA

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HCFA COMMON PROCEDURE CODING SYSTEM

UPPER LIMB - BELOW ELBOW - L6100-L6199

L6100 BELOW ELBOW, MOLDED SOCKET, FLEXIBLE ELBOW HINGE, TRICEPS PAD

M/D=1181 A/C COV DCA

L6110 BELOW ELBOW, MOLDED SOCKET, (MUNSTER OR NORTHWESTERN SUSPENSION TYPES)

M/D=1181 A/C COV DCA

L6120 BELOW ELBOW, MOLDED DOUBLE WALL SPLIT SOCKET, STEP-UP HINGES, HALF CUFF

M/D=1181 A/C COV DCA

L6130 BELOW ELBOW, MOLDED DOUBLE WALL SPLIT SOCKET, STUMP ACTIVATED LOCKING HINGE, HALF CUFF

M/D=1181 A/C COV DCA

UPPER LIMB - ELBOW DISARTICULATION - L6200-L6249

L6200 ELBOW DISARTICULATION, MOLDED SOCKET, OUTSIDE LOCKING HINGE, FOREARM

M/D=1181 A/C COV DCA

L6205 ELBOW DISARTICULATION, MOLDED SOCKET WITH EXPANDABLE INTERFACE, OUTSIDE LOCKING HINGES, FOREARM

M/D=1187 A/C=A COV DCA

UPPER LIMB - ABOVE ELBOW - L6250-L6299

L6250 ABOVE ELBOW, MOLDED DOUBLE WALL SOCKET, INTERNAL LOCKING ELBOW, FOREARM

M/D=1181 A/C COV DCA

UPPER LIMB - SHOULDER DISARTICULATION - L6300-L6349

L6300 SHOULDER DISARTICULATION, MOLDED SOCKET, SHOULDER BULKHEAD, HUMERAL SECTION, INTERNAL LOCKING ELBOW, FOREARM

M/D=1181 A/C COV DCA

L6310 SHOULDER DISARTICULATION, PASSIVE RESTORATION (COMPLETE PROSTHESIS)

M/D=1181 A/C COV DCA

L6320 SHOULDER DISARTICULATION, PASSIVE RESTORATION (SHOULDER CAP ONLY)

M/D=1181 A/C COV DCA

UPPER LIMB - INTERSCAPULAR THORACIC - L6350-L6399

L6350 INTERSCAPULAR THORACIC, MOLDED SOCKET, SHOULDER BULKHEAD, HUMERAL SECTION, INTERNAL LOCKING ELBOW, FOREARM

M/D=1185 A/C=C COV DCA

L6360 INTERSCAPULAR THORACIC, PASSIVE RESTORATION (COMPLETE PROSTHESIS)

M/D= 986 A/C=E COV DCA

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HCFA COMMON PROCEDURE CODING SYSTEM

L6370 INTERSCAPULAR THORACIC, PASSIVE RESTORATION (SHOULDER CAP ONLY)

UPPER LIMB - IMMEDIATE AND EARLY POST SURGICAL PROCEDURES L6380-L6399

L6380 IMMEDIATE POST SURGICAL OR EARLY FITTING, APPLICATION OF INITIAL RIGID DRESSING, INCLUDING FITTING ALIGNMENT AND SUSPENSION OF COMPONENTS, AND ONE CAST CHANGE, WRIST DISARTICULATION OR BELOW ELBOW

L6382 IMMEDIATE POST SURGICAL OR EARLY FITTING, APPLICATION OF INITIAL RIGID DRESSING INCLUDING FITTING ALIGNMENT AND SUSPENSION OF COMPONENTS, AND ONE CAST CHANGE, ELBOW DISARTICULATION OR ABOVE ELBOW

L6384 IMMEDIATE POST SURGICAL OR EARLY FITTING, APPLICATION OF INITIAL RIGID DRESSING INCLUDING FITTING ALIGNMENT AND SUSPENSION OF COMPONENTS, AND ONE CAST CHANGE, SHOULDER DISARTICULATION OR INTERSCAPULAR THORACIC

L6386 IMMEDIATE POST SURGICAL OR EARLY FITTING, EACH ADDITIONAL CAST CHANGE AND REALIGNMENT

L6388 IMMEDIATE POST SURGICAL OR EARLY FITTING, APPLICATION OF RIGID DRESSING ONLY

UPPER LIMB - ENDOSKELETAL - BELOW ELBOW - L6400-L6449

L6400 BELOW ELBOW, MOLDED SOCKET, ENDOSKELETAL SYSTEM, INCLUDING SOFT PROSTHETIC TISSUE SHAPING

UPPER LIMB - ENDOSKELETAL - ELBOW DISARTICULATION - L6450-L6499

L6450 ELBOW DISARTICULATION, MOLDED SOCKET, ENDOSKELETAL SYSTEM, INCLUDING SOFT PROSTHETIC TISSUE SHAPING

UPPER LIMB - ENDOSKELETAL - ABOVE ELBOW - L6500-L6549

L6500 ABOVE ELBOW, MOLDED SOCKET, ENDOSKELETAL SYSTEM, INCLUDING SOFT PROSTHETIC TISSUE SHAPING

UPPER LIMB - ENDOSKELETAL - SHOULDER DISARTICULATION - L6550-L6569

L6550 SHOULDER DISARTICULATION, MOLDED SOCKET, ENDOSKELETAL SYSTEM, INCLUDING SOFT PROSTHETIC TISSUE SHAPING

UPPER LIMB - ENDOSKELETAL - INTERSCAPULAR THORACIC - L6570-L6599

L6570 INTERSCAPULAR THORACIC, MOLDED SOCKET, ENDOSKELETAL SYSTEM, INCLUDING SOFT PROSTHETIC TISSUE SHAPING

M/D=1181 A/C=C COV DCA

M/D=1187 A/C=A DCA

M/D=1187 A/C=A COV DCA

M/D=1187 A/C=A COV DCA

M/D=1187 A/C=A COV DCA

M/D=1187 A/C=A COV DCA

M/D=1187 A/C=A COV DCA

M/D=1181 A/C COV DCA

M/D=1181 A/C COV DCA

M/D=1181 A/C COV DCA

M/D=1185 A/C=C COV DCA

M/D=1185 A/C=C COV DCA

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L6590	PREPARATORY, WRIST DISARTICULATION OR BELOW ELBOW, SINGLE WALL PLASTIC SOCKET, FRICTION WRIST, FLEXIBLE ELBOW HINGES, FIGURE OF EIGHT HARNESS, HUMERAL CUFF, BOWDEN CABLE CONTROL, USMC OR EQUAL PYLON, NO COVER, MOLDED TO PATIENT MODEL	*	M/D=1187 A/C=A COV	DCA
L6582	PREPARATORY, WRIST DISARTICULATION OR BELOW ELBOW, SINGLE WALL SOCKET, FRICTION WRIST, FLEXIBLE ELBOW HINGES, FIGURE OF EIGHT HARNESS, HUMERAL CUFF, BOWDEN CABLE CONTROL, USMC OR EQUAL PYLON, NO COVER, DIRECT FORMED	*	M/D=1187 A/C=A COV	DCA
L6584	PREPARATORY, ELBOW DISARTICULATION OR ABOVE ELBOW, SINGLE WALL PLASTIC SOCKET, FRICTION WRIST, LOCKING ELBOW, FIGURE OF EIGHT HARNESS, FAIR LEAD CABLE CONTROL, USMC OR EQUAL PYLON, NO COVER, MOLDED TO PATIENT MODEL	*	M/D=1187 A/C=A COV	DCA
L6586	PREPARATORY, ELBOW DISARTICULATION OR ABOVE ELBOW, SINGLE WALL SOCKET, FRICTION WRIST, LOCKING ELBOW, FIGURE OF EIGHT HARNESS, FAIR LEAD CABLE CONTROL, USMC OR EQUAL PYLON, NO COVER, DIRECT FORMED	*	M/D=1187 A/C=A COV	DCA
L6588	PREPARATORY, SHOULDER DISARTICULATION OR INTERSCAPULAR THORACIC, SINGLE WALL PLASTIC SOCKET, SHOULDER JOINT, LOCKING ELBOW, FRICTION WRIST, CHEST STRAP, FAIR LEAD CABLE CONTROL, USMC OR EQUAL PYLON, NO COVER, MOLDED TO PATIENT MODEL	*	M/D=1187 A/C=A COV	DCA
L6590	PREPARATORY, SHOULDER DISARTICULATION OR INTERSCAPULAR THORACIC, SINGLE WALL SOCKET, SHOULDER JOINT, LOCKING ELBOW, FRICTION WRIST, CHEST STRAP, FAIR LEAD CABLE CONTROL, USMC OR EQUAL PYLON, NO COVER, DIRECT FORMED	*	M/D=1187 A/C=A COV	DCA
ADDITIONS - UPPER LIMB - L6600-L6999				
NOTE: THE FOLLOWING PROCEDURES/MODIFICATIONS/COMPONENTS MAY BE ADDED TO OTHER BASE PROCEDURES. THE ITEMS IN THIS SECTION SHOULD REFLECT THE ADDITIONAL COMPLEXITY OF EACH MODIFICATION PROCEDURE, IN ADDITION TO BASE PROCEDURE, AT THE TIME OF THE ORIGINAL ORDER.				
L6600	UPPER EXTREMITY ADDITIONS, POLYCENTRIC HINGE, PAIR	*	M/D=1181 A/C	COV DCA
L6605	UPPER EXTREMITY ADDITIONS, SINGLE PIVOT HINGE, PAIR	*	M/D=1181 A/C	COV DCA
L6610	UPPER EXTREMITY ADDITIONS, FLEXIBLE METAL HINGE, PAIR	*	M/D=1181 A/C	COV DCA
L6615	UPPER EXTREMITY ADDITION, DISCONNECT LOCKING WRIST UNIT	*	M/D=1187 A/C=E COV	DCA
L6616	UPPER EXTREMITY ADDITION, ADDITIONAL DISCONNECT INSERT FOR LOCKING WRIST UNIT, EACH	*	M/D=1188 A/C=A COV	DCA
L6620	UPPER EXTREMITY ADDITION, FLEXION-FRICTION WRIST UNIT	*	M/D=1187 A/C=E COV	DCA
L6623	UPPER EXTREMITY ADDITION, SPRING ASSISTED ROTATIONAL WRIST UNIT WITH LATCH RELEASE	*	M/D=1187 A/C=A COV	DCA
L6625	UPPER EXTREMITY ADDITION, ROTATION WRIST UNIT WITH CABLE LOCK	*	M/D=1187 A/C=E COV	DCA

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L6628	UPPER EXTREMITY ADDITION, QUICK DISCONNECT HOOK ADAPTER, OTTO BOCK OR EQUAL	•	M/D=1187 A/C=A COV	DCA
L6629	UPPER EXTREMITY ADDITION, QUICK DISCONNECT LAMINATION COLLAR WITH COUPLING PIECE, OTTO BOCK OR EQUAL	•	M/D=1187 A/C=A COV	DCA
L6630	UPPER EXTREMITY ADDITION, STAINLESS STEEL, ANY WRIST	•	M/D=1187 A/C=E COV	DCA
L6632	UPPER EXTREMITY ADDITION, LATEX SUSPENSION SLEEVE, EACH	•	M/D=1187 A/C=A COV	DCA
L6635	UPPER EXTREMITY ADDITION, LIFT ASSIST FOR ELBOW	•	M/D=1187 A/C=C COV	DCA
L6637	UPPER EXTREMITY ADDITION, NUDGE CONTROL ELBOW LOCK	•	M/D=1187 A/C=A COV	DCA
L6640	UPPER EXTREMITY ADDITIONS, SHOULDER ABDUCTION JOINT, PAIR	•	M/D=1181 A/C COV	DCA
L6641	UPPER EXTREMITY ADDITION, EXCURSION AMPLIFIER, PULLEY TYPE	•	M/D=1187 A/C=A COV	DCA
L6642	UPPER EXTREMITY ADDITION, EXCURSION AMPLIFIER, LEVER TYPE	•	M/D=1187 A/C=A COV	DCA
L6645	UPPER EXTREMITY ADDITION, SHOULDER FLEXION-ABDUCTION JOINT, EACH	•	M/D=1187 A/C=E COV	DCA
L6650	UPPER EXTREMITY ADDITION, SHOULDER UNIVERSAL JOINT, EACH	•	M/D=1187 A/C=E COV	DCA
L6655	UPPER EXTREMITY ADDITION, STANDARD CONTROL CABLE, EXTRA	•	M/D=1187 A/C=E COV	DCA
L6660	UPPER EXTREMITY ADDITION, HEAVY DUTY CONTROL CABLE	•	M/D=1187 A/C=E COV	DCA
L6665	UPPER EXTREMITY ADDITION, TEFLON, OR EQUAL, CABLE LINING	•	M/D=1187 A/C=E COV	DCA
L6670	UPPER EXTREMITY ADDITION, HOOK TO HAND, CABLE ADAPTER	•	M/D=1187 A/C=E COV	DCA
L6672	UPPER EXTREMITY ADDITION, HARNESS, CHEST OR SHOULDER, SADDLE TYPE	•	M/D=1187 A/C=E COV	DCA
L6675	UPPER EXTREMITY ADDITION, HARNESS, FIGURE OF ("8") EIGHT TYPE, FOR SINGLE CONTROL	•	M/D=1187 A/C=E COV	DCA
L6676	UPPER EXTREMITY ADDITION, HARNESS, FIGURE OF ("8") EIGHT TYPE, FOR DUAL CONTROL	•	M/D=1187 A/C=E COV	DCA
L6680	UPPER EXTREMITY ADDITION, TEST SOCKET, WRIST DISARTICULAT- ION OR BELOW ELBOW	•	M/D=1187 A/C=E COV	DCA
L6682	UPPER EXTREMITY ADDITION, TEST SOCKET, ELBOW DISARTICULAT- ION OR ABOVE ELBOW	•	M/D=1187 A/C=E COV	DCA
L6684	UPPER EXTREMITY ADDITION, TEST SOCKET, SHOULDER DIS- ARTICULATION OR INTERSCAPULAR THORACIC	•	M/D=1187 A/C=E COV	DCA

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L6686 UPPER EXTREMITY ADDITION, SUCTION SOCKET
 L6687 UPPER EXTREMITY ADDITION, FRAME TYPE SOCKET, BELOW ELBOW
 OR WRIST DISARTICULATION
 L6688 UPPER EXTREMITY ADDITION, FRAME TYPE SOCKET, ABOVE ELBOW OR ELBOW
 DISARTICULATION
 L6689 UPPER EXTREMITY ADDITION, FRAME TYPE SOCKET, SHOULDER DISARTICULATION
 L6690 UPPER EXTREMITY ADDITION, FRAME TYPE SOCKET, INTERSCAPULAR-THORACIC
 L6691 UPPER EXTREMITY ADDITION, REMOVABLE INSERT, EACH
 L6692 UPPER EXTREMITY ADDITION, SILICONE GEL INSERT OR EQUAL, EACH
 TERMINAL DEVICES - L6700-L6899

HOOKS

L6700 TERMINAL DEVICE, HOOK, DORRANCE, OR EQUAL, MODEL #3
 L6705 TERMINAL DEVICE, HOOK, DORRANCE, OR EQUAL, MODEL #5
 L6710 TERMINAL DEVICE, HOOK, DORRANCE, OR EQUAL, MODEL #5X
 L6715 TERMINAL DEVICE, HOOK, DORRANCE, OR EQUAL, MODEL #5XA
 L6720 TERMINAL DEVICE, HOOK, DORRANCE, OR EQUAL, MODEL #6
 L6725 TERMINAL DEVICE, HOOK, DORRANCE, OR EQUAL, MODEL #7
 L6730 TERMINAL DEVICE, HOOK, DORRANCE, OR EQUAL, MODEL #7LO
 L6735 TERMINAL DEVICE, HOOK, DORRANCE, OR EQUAL, MODEL #8
 L6740 TERMINAL DEVICE, HOOK, DORRANCE, OR EQUAL, MODEL #8X
 L6745 TERMINAL DEVICE, HOOK, DORRANCE, OR EQUAL, MODEL #88X
 L6750 TERMINAL DEVICE, HOOK, DORRANCE, OR EQUAL, MODEL #10P
 L6755 TERMINAL DEVICE, HOOK, DORRANCE, OR EQUAL, MODEL #10X
 L6760 TERMINAL DEVICE, HOOK, DORRANCE, OR EQUAL, MODEL #10AW
 L6765 TERMINAL DEVICE, HOOK, DORRANCE, OR EQUAL, MODEL #12P
 L6770 TERMINAL DEVICE, HOOK, DORRANCE, OR EQUAL, MODEL #99X

M/D=1187 A/C=A COV DCA
 M/D=1188 A/C=C COV DCA
 M/D=1188 A/C=C COV DCA
 M/D=1187 A/C=A COV DCA
 M/D=1187 A/C=A COV DCA
 M/D=1187 A/C=A COV DCA
 M/D=1188 A/C=A COV DCA
 M/D=1187 A/C=C DCA
 M/D=1187 A/C=E COV DCA
 M/D=1187 A/C=E COV DCA
 M/D=1187 A/C=E COV DCA
 M/D=1187 A/C=E COV DCA
 M/D=1187 A/C=E COV DCA
 M/D=1187 A/C=E COV DCA
 M/D=1187 A/C=E COV DCA
 M/D=1187 A/C=E COV DCA
 M/D=1188 A/C=D COV DCA
 M/D=1187 A/C=E COV DCA
 M/D=1187 A/C=E COV DCA

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L6775 TERMINAL DEVICE, HOOK, DORRANCE, OR EQUAL, MODEL #555
 L6780 TERMINAL DEVICE, HOOK, DORRANCE, OR EQUAL, MODEL #SS555
 L6785 TERMINAL DEVICE, HOOK, DORRANCE, OR EQUAL, MODEL #SS555
 L6790 TERMINAL DEVICE, HOOK-ACCU HOOK, OR EQUAL
 L6795 TERMINAL DEVICE, HOOK-2 LOAD, OR EQUAL
 L6800 TERMINAL DEVICE, HOOK-APRL VC, OR EQUAL
 L6805 TERMINAL DEVICE, MODIFIER WRIST FLEXION UNIT
 L6806 TERMINAL DEVICE, HOOK, TRS GRIP, VC
 L6807 TERMINAL DEVICE, HOOK, TRS ADEPT, CHILD, VC
 L6808 TERMINAL DEVICE, HOOK, TRS ADEPT, INFANT, VC
 L6809 TERMINAL DEVICE, HOOK, TRS SUPER SPORT, PASSIVE
 L6810 TERMINAL DEVICE, PINCHER TOOL, OTTO BOCK OR EQUAL
 HANDS
 L6825 TERMINAL DEVICE, HAND, DORRANCE, VO
 L6830 TERMINAL DEVICE, HAND, APRL, VC
 L6835 TERMINAL DEVICE, HAND, SIERRA, VO
 L6840 TERMINAL DEVICE, HAND, BECKER IMPERIAL
 L6845 TERMINAL DEVICE, HAND, BECKER LOCK GRIP
 L6850 TERMINAL DEVICE, HAND, BECKER PLYLITE
 L6855 TERMINAL DEVICE, HAND, ROBIN-AIDS, VO
 L6860 TERMINAL DEVICE, HAND, ROBIN-AIDS, VO SOFT
 L6865 TERMINAL DEVICE, HAND, PASSIVE HAND
 L6867 TERMINAL DEVICE, HAND, DETROIT INFANT HAND (MECHANICAL)
 L6868 TERMINAL DEVICE, HAND, PASSIVE INFANT HAND, (STEEPER, HOSMER OR EQUAL)
 L6869 TERMINAL DEVICE, HAND, PASSIVE INFANT HAND, HOSMER OR EQUAL

M/D=1187 A/C=E COV DCA
 M/D=1187 A/C=E COV DCA
 M/D=1188 A/C=D COV DCA
 M/D=1187 A/C=E COV DCA
 M/D=1187 A/C=E COV DCA
 M/D=1187 A/C=E COV DCA
 M/D=1184 A/C COV DCA
 M/D=1188 A/C=E COV DCA
 M/D=1188 A/C=E COV DCA
 M/D=1188 A/C=E COV DCA
 M/D=1188 A/C=E COV DCA
 M/D=1187 A/C=A COV DCA
 M/D=1181 A/C COV DCA
 M/D=1187 A/C=E COV DCA
 M/D=1187 A/C=E COV DCA
 M/D=1187 A/C=E COV DCA
 M/D=1187 A/C=E COV DCA
 M/D=1187 A/C=E COV DCA
 M/D=1187 A/C=E COV DCA
 M/D=1187 A/C=A COV DCA
 M/D=1187 A/C=A COV DCA
 M/D=1188 A/C=D COV DCA
 XR1=L6868 XR2 XR3

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L6870	TERMINAL DEVICE, HAND, CHILD MITT	*	M/D=1187 A/C=E COV	DCA
L6872	TERMINAL DEVICE, HAND, NYU CHILD HAND	*	M/D=1187 A/C=A COV	DCA
L6873	TERMINAL DEVICE, HAND, MECHANICAL INFANT HAND, STEEPER OR EQUAL	*	M/D=1187 A/C=A COV	DCA
L6875	TERMINAL DEVICE, HAND, BOCK, VC	*	M/D=1187 A/C=E COV	DCA
L6880	TERMINAL DEVICE, HAND, BOCK, VO	*	M/D=1187 A/C=E COV	DCA
	GLOVES FOR ABOVE HANDS	*		
L6890	TERMINAL DEVICE, GLOVE FOR ABOVE HANDS, PRODUCTION GLOVE	*	M/D=1187 A/C=C COV	DCA
L6895	TERMINAL DEVICE, GLOVE FOR ABOVE HANDS, CUSTOM GLOVE	*	M/D=1187 A/C=C COV	DCA
	HAND RESTORATION - L6900-L6919	*		
L6900	HAND RESTORATION (CASTS, SHADING AND MEASUREMENTS INCLUDED), PARTIAL HAND, WITH GLOVE, THUMB OR ONE FINGER REMAINING	*	M/D=1181 A/C COV	DCA
L6905	HAND RESTORATION (CASTS, SHADING AND MEASUREMENTS INCLUDED), PARTIAL HAND, WITH GLOVE, MULTIPLE FINGERS REMAINING	*	M/D=1187 A/C=E COV	DCA
L6910	HAND RESTORATION (CASTS, SHADING AND MEASUREMENTS INCLUDED), PARTIAL HAND, WITH GLOVE, NO FINGERS REMAINING	*	M/D=1181 A/C COV	DCA
L6915	HAND RESTORATION (SHADING, AND MEASUREMENTS INCLUDED), REPLACEMENT GLOVE FOR ABOVE	*	M/D=1181 A/C COV	DCA
	EXTERNAL POWER - BASE DEVICES L6920-L6999	*	M/D=1187 A/C A	DCA
L6920	WRIST DISARTICULATION, EXTERNAL POWER, SELF-SUSPENDED INNER SOCKET, REMOVABLE FOREARM SHELL, OTTO BOCK OR EQUAL, SWITCH, CABLES, TWO BATTERIES AND ONE CHARGER, SWITCH CONTROL OF TERMINAL DEVICE	*	M/D=1187 A/C=A COV	DCA
L6925	WRIST DISARTICULATION, EXTERNAL POWER, SELF-SUSPENDED INNER SOCKET, REMOVABLE FOREARM SHELL, OTTO BOCK OR EQUAL ELECTRODES, CABLES, TWO BATTERIES AND ONE CHARGER, MYOELECTRONIC CONTROL OF TERMINAL DEVICE	*	M/D=1187 A/C=A COV	DCA
L6930	BELOW ELBOW, EXTERNAL POWER, SELF-SUSPENDED INNER SOCKET, REMOVABLE FOREARM SHELL, OTTO BOCK OR EQUAL SWITCH, CABLES, TWO BATTERIES AND ONE CHARGER, SWITCH CONTROL OF TERMINAL DEVICE	*	M/D=1187 A/C=A COV	DCA
L6935	BELOW ELBOW, EXTERNAL POWER, SELF-SUSPENDED INNER SOCKET, REMOVABLE FOREARM SHELL, OTTO BOCK OR EQUAL ELECTRODES, CABLES, TWO BATTERIES AND ONE CHARGER, MYOELECTRONIC CONTROL OF TERMINAL DEVICE	*	M/D=1187 A/C=A COV	DCA

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L6940	ELBOW DISARTICULATION, EXTERNAL POWER, MOLDED INNER SOCKET, REMOVABLE HUMERAL SHELL, OUTSIDE LOCKING HINGES, FOREARM, OTTO BOCK OR EQUAL SWITCH, CABLES, TWO BATTERIES AND ONE CHARGER, SWITCH CONTROL OF TERMINAL DEVICE	*	M/D=1187 A/C=A COV	DCA
L6945	ELBOW DISARTICULATION, EXTERNAL POWER, MOLDED INNER SOCKET, REMOVABLE HUMERAL SHELL, OUTSIDE LOCKING HINGES, FOREARM, OTTO BOCK OR EQUAL ELECTRODES, CABLES, TWO BATTERIES AND ONE CHARGER, MYOELECTRONIC CONTROL OF TERMINAL DEVICE	*	M/D=1187 A/C=A COV	DCA
L6950	ABOVE ELBOW, EXTERNAL POWER, MOLDED INNER SOCKET, REMOVABLE HUMERAL SHELL, INTERNAL LOCKING ELBOW, FOREARM, OTTO BOCK OR EQUAL SWITCH, CABLES, TWO BATTERIES AND ONE CHARGER, SWITCH CONTROL OF TERMINAL DEVICE	*	M/D=1187 A/C=A COV	DCA
L6955	ABOVE ELBOW, EXTERNAL POWER, MOLDED INNER SOCKET, REMOVABLE HUMERAL SHELL, INTERNAL LOCKING ELBOW, FOREARM, OTTO BOCK OR EQUAL ELECTRODES, CABLES TWO BATTERIES AND ONE CHARGER, MYOELECTRONIC CONTROL OF TERMINAL DEVICE	*	M/D=1187 A/C=A COV	DCA
L6960	SHOULDER DISARTICULATION, EXTERNAL POWER, MOLDED INNER SOCKET, REMOVABLE SHOULDER SHELL, SHOULDER BULKHEAD, HUMERAL SECTION, MECHANICAL ELBOW, FOREARM, OTTO BOCK OR EQUAL SWITCH, CABLES, TWO BATTERIES AND ONE CHARGER, SWITCH CONTROL OF TERMINAL DEVICE	*	M/D=1187 A/C=A COV	DCA
L6965	SHOULDER DISARTICULATION, EXTERNAL POWER, MOLDED INNER SOCKET, REMOVABLE SHOULDER SHELL, SHOULDER BULKHEAD, HUMERAL SECTION, MECHANICAL ELBOW, FOREARM, OTTO BOCK OR EQUAL ELECTRODES, CABLES, TWO BATTERIES AND ONE CHARGER, MYOELECTRONIC CONTROL OF TERMINAL DEVICE	*	M/D=1187 A/C=A COV	DCA
L6970	INTERSCAPULAR-THORACIC, EXTERNAL POWER, MOLDED INNER SOCKET, REMOVABLE SHOULDER SHELL, SHOULDER BULKHEAD, HUMERAL SECTION, MECHANICAL ELBOW, FOREARM, OTTO BOCK OR EQUAL SWITCH, CABLES, TWO BATTERIES AND ONE CHARGER, SWITCH CONTROL OF TERMINAL DEVICE	*	M/D=1187 A/C=A COV	DCA
L6975	INTERSCAPULAR-THORACIC, EXTERNAL POWER, MOLDED INNER SOCKET, REMOVABLE SHOULDER SHELL, SHOULDER BULKHEAD, HUMERAL SECTION, MECHANICAL ELBOW, FOREARM, OTTO BOCK OR EQUAL ELECTRODES, CABLES, TWO BATTERIES AND ONE CHARGER, MYOELECTRONIC CONTROL OF TERMINAL DEVICE	*	M/D=1187 A/C=A COV	DCA
EXTERNAL POWER - TERMINAL DEVICES - L7000-L7099		*	M/D=1187 A/C=C	DCA
L7000	BELOW ELBOW, EXTERNAL POWER, MOLDED PLASTIC SOCKET, HAND, GLOVE, AND BATTERY CHARGER, SWITCH CONTROL OF TERMINAL DEVICE	*	M/D=1187 A/C=D COV XR1=L6930 XR2=L7010 XR3=L6890	DCA
L7010	ELECTRONIC HAND, OTTO BOCK, STEEPER OR EQUAL, SWITCH CONTROLLED	*	M/D=1187 A/C=A COV	DCA
L7015	ELECTRONIC HAND, SYSTEM TEKNIK, VARIETY VILLAGE OR EQUAL, SWITCH CONTROLLED	*	M/D=1187 A/C=A COV	DCA
L7020	ELECTRONIC GREIFER, OTTO BOCK OR EQUAL, SWITCH CONTROLLED	*	M/D=1187 A/C=A COV	DCA

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HCFA COMMON PROCEDURE CODING SYSTEM

L7025	ELECTRONIC HAND, OTTO BOCK OR EQUAL, MYOELECTRONICALLY CONTROLLED	M/D=1187	A/C=A	COV	DCA
L7030	ELECTRONIC HAND, SYSTEM TEKNIK, VARIETY VILLAGE OR EQUAL, MYOELECTRONICALLY CONTROLLED	M/D=1187	A/C=A	COV	DCA
L7035	ELECTRONIC GREIFER, OTTO BOCK OR EQUAL, MYOELECTRONICALLY CONTROLLED	M/D=1187	A/C=A	COV	DCA
L7040	PREHENSILE ACTUATOR, HOSMER OR EQUAL, SWITCH CONTROLLED	M/D=1187	A/C=A	COV	DCA
L7045	ELECTRONIC HOOK, CHILD, MICHIGAN OR EQUAL, SWITCH CONTROLLED	M/D=1187	A/C=A	COV	DCA
L7050	BELOW ELBOW, EXTERNAL POWER, MOLDED PLASTIC SOCKET, HAND, GLOVE, AND BATTERY CHARGER, WITH MYOELECTRIC CONTROL OF TERMINAL DEVICE	M/D=1187	A/C=D	COV	DCA
		XR1=L6935	XR2=L7025	XR3=L6890	
EXTERNAL POWER - ELBOW - L7100-L7199					
L7100	ELBOW DISARTICULATION, EXTERNAL POWER, MOLDED PLASTIC SOCKET, EXTERNAL LOCKING ELBOW HINGES, FOREARM, HAND, GLOVE AND BATTERY CHARGER, WITH SWITCH CONTROL OF TERMINAL DEVICE	M/D=1187	A/C=D	COV	DCA
		XR1=L6940	XR2=L7010	XR3=L6890	
L7150	ELBOW DISARTICULATION, EXTERNAL POWER, MOLDED PLASTIC SOCKET, EXTERNAL LOCKING ELBOW HINGES, FOREARM, HAND, GLOVE AND BATTERY CHARGER, WITH MYOELECTRIC CONTROL OF TERMINAL DEVICE	M/D=1187	A/C=D	COV	DCA
		XR1=L6945	XR2=L7025	XR3=L6890	
L7160	ELECTRONIC ELBOW, BOSTON OR EQUAL, SWITCH CONTROLLED	M/D=1187	A/C=A	COV	DCA
L7165	ELECTRONIC ELBOW, BOSTON OR EQUAL, MYOELECTRONICALLY CONTROLLED	M/D=1187	A/C=A	COV	DCA
L7170	ELECTRONIC ELBOW, HOSMER OR EQUAL, SWITCH CONTROLLED	M/D=1187	A/C=A	COV	DCA
L7180	ELECTRONIC ELBOW, UTAH OR EQUAL, MYOELECTRONICALLY CONTROLLED	M/D=1187	A/C=A	COV	DCA
L7185	ELECTRONIC ELBOW, ADOLESCENT, VARIETY VILLAGE OR EQUAL, SWITCH CONTROLLED	M/D=1188	A/C=C	COV	DCA
L7186	ELECTRONIC ELBOW, CHILD, VARIETY VILLAGE OR EQUAL, SWITCH CONTROLLED	M/D=1188	A/C=A	COV	DCA
L7190	ELECTRONIC ELBOW, ADOLESCENT, VARIETY VILLAGE OR EQUAL, MYOELECTRONICALLY CONTROLLED	M/D=1188	A/C=C	COV	DCA
L7191	ELECTRONIC ELBOW, CHILD, VARIETY VILLAGE OR EQUAL, MYOELECTRONICALLY CONTROLLED	M/D=1188	A/C=A	COV	DCA
EXTERNAL POWER - ABOVE ELBOW - L7200-L7259					
L7200	ABOVE ELBOW, EXTERNAL POWER, MOLDED PLASTIC SOCKET, INTERNAL LOCKING ELBOW, FOREARM, HAND, GLOVE, AND BATTERY CHARGER, WITH SWITCH CONTROL OF TERMINAL DEVICE	M/D=1187	A/C=D	COV	DCA
		XR1=L6950	XR2=L7010	XR3=L6890	

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HCFA COMMON PROCEDURE CODING SYSTEM

L7250 ABOVE ELBOW, EXTERNAL POWER, MOLDED PLASTIC SOCKET, INTERNAL
LOCKING ELBOW FOREARM, HAND, GLOVE, AND BATTERY CHARGER, WITH
MYOELECTRIC CONTROL OF TERMINAL DEVICE

EXTERNAL POWER - CONTROL MODULES L7260-L7299

L7260 ELECTRONIC WRIST ROTATOR, OTTO BOCK OR EQUAL

L7261 ELECTRONIC WRIST ROTATOR, FOR UTAH ARM

L7266 SERVO CONTROL, STEEPER OR EQUAL

L7272 ANALOGUE CONTROL, UNB OR EQUAL

L7274 PROPORTIONAL CONTROL, 12 VOLT, UTAH OR EQUAL

EXTERNAL POWER - SHOULDER - L7300-L7359

L7300 SHOU. PROSTH. EXT. POWER, MOLDED PLASTIC SOCKET, SHOU. BULKHEAD,
HUMERAL SECT., INT. LOCKING ELBOW LIFT ASSIST, FOREARM, HAND, GLOVE
: BATTERY CHARGER WITH SWITCH CONTROL OF TERMINAL DEVICE

L7350 SHOU. PROSTH. EXT. POWER, MOLDED PLASTIC SOCKET, SHOU. BULKHEAD,
HUMERAL SECT., INT. LOCKING ELBOW LIFT ASSIST, FOREARM, HAND, GLOVE
: BATTERY CHARGER WITH MYOELECTRIC CONTROL OF TERMINAL DEVICE

EXTERNAL POWER - BATTERY COMPONENTS L7360-L7499

L7360 SIX VOLT BATTERY, OTTO BOCK OR EQUAL, EACH

L7362 BATTERY CHARGER, SIX VOLT, OTTO BOCK OR EQUAL

L7364 TWELVE VOLT BATTERY, UTAH OR EQUAL, EACH

L7366 BATTERY CHARGER, TWELVE VOLT, UTAH OR EQUAL

L7499 UNLISTED PROCEDURES FOR UPPER EXTREMITY PROSTHESIS

REPAIRS - L7500-L7599

(EXCLUDES V5014 REPAIR OPORAL OR LARYNGEAL PROSTHESIS OR ARTIFICIAL LARYNX)

L7500 REPAIR OF PROSTHETIC DEVICE, HOURLY RATE (EXCLUDES V3014 REPAIR OF
ORAL OR LARYNGEAL PROTHESIS OR ARTIFICIAL LARYNX)

L7510 REPAIR PROSTHETIC DEVICE, REPAIR OR REPLACE MINOR PARTS
(EXCLUDES V5014 REPAIR OF ORAL OR LARYNGEAL PROSTHESIS OR ARTIFICIAL LARYNX)

M/D=1187 A/C=D COV DCA
XR1=L6955 XR2=L7025 XR3=L6890

M/D=1187 A/C=D DCA

M/D=1187 A/C=A COV DCA

M/D=1187 A/C=A COV DCA

M/D=1187 A/C=A COV DCA

M/D=1187 A/C=A COV DCA

M/D=1187 A/C=A COV DCA

M/D=1187 A/C=D DCA

M/D=1187 A/C=D COV DCA
XR1=L6960 XR2=L7010 XR3=L6890

M/D=1187 A/C=D COV DCA
XR1=L6965 XR2=L7025 XR3=L6890

M/D=1187 A/C=A DCA

M/D=1187 A/C=A COV DCA

M/D=1187 A/C=A COV DCA

M/D=1187 A/C=A COV DCA

M/D=1187 A/C=A COV DCA

M/D=1184 A/C COV DCA

M/D=1189 A/C=C COV=D DCA
MCM 2100.4 2130D 2183

M/D=1189 A/C=C COV=D DCA
MCM 2100.4 2130D 2183

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HCFA COMMON PROCEDURE CODING SYSTEM

GENERAL - BREAST PROSTHESES - L8000-L8099

L8000 BREAST PROSTHESIS, MASTECTOMY BRA

L8010 BREAST PROSTHESIS, MASTECTOMY SLEEVE

L8020 BREAST PROSTHESIS, MASTECTOMY FORM

L8030 BREAST PROSTHESIS, SILICONE OR EQUAL

GENERAL - ELASTIC SUPPORTS - L8100-L8299

L8100 ELASTIC SUPPORT, ELASTIC STOCKING, BELOW KNEE, MEDIUM
WEIGHT, EACHL8110 ELASTIC SUPPORT, ELASTIC STOCKING, BELOW KNEE, HEAVY
WEIGHT, EACHL8120 ELASTIC SUPPORT, ELASTIC STOCKING, BELOW KNEE, SURGICAL
WEIGHT, (LINTON TYPE OR EQUAL), EACHL8130 ELASTIC SUPPORT, ELASTIC STOCKING, ABOVE KNEE, MEDIUM
WEIGHT, EACHL8140 ELASTIC SUPPORT, ELASTIC STOCKING, ABOVE KNEE, HEAVY
WEIGHT, EACHL8150 ELASTIC SUPPORT, ELASTIC STOCKING, ABOVE KNEE, SURGICAL
WEIGHT, (LINTON TYPE OR EQUAL), EACHL8160 ELASTIC SUPPORT, ELASTIC STOCKING, FULL LENGTH, MEDIUM
WEIGHT, EACHL8170 ELASTIC SUPPORT, ELASTIC STOCKING, FULL LENGTH, HEAVY
WEIGHT, EACHM/D=1189 A/C=F COV=D DCA
CIM=60-9 F/D RI
NCM 2133M/D=1189 A/C=F COV=D DCA
CIM=60-9 F/D RI
NCM 2133M/D=1189 A/C=F COV=D DCA
CIM=60-9 F/D RI
NCM 2133M/D=1189 A/C=F COV=D DCA
CIM=60-9 F/D RI
NCM 2133M/D=1189 A/C=F COV=M DCA
CIM=60-9 F/D RI
NCM 2133M/D=1189 A/C=F COV=M DCA
CIM=60-9 F/D RI
NCM 2133M/D=1189 A/C=F COV=M DCA
CIM=60-9 F/D RI
NCM 2133M/D=1189 A/C=F COV=M DCA
CIM=60-9 F/D RI
NCM 2133M/D=1189 A/C=F COV=M DCA
CIM=60-9 F/D RI
NCM 2133M/D=1189 A/C=F COV=M DCA
CIM=60-9 F/D RI
NCM 2133M/D=1189 A/C=F COV=M DCA
CIM=60-9 F/D RI
NCM 2133M/D=1189 A/C=F COV=M DCA
CIM=60-9 F/D RI
NCM 2133

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HCFA COMMON PROCEDURE CODING SYSTEM

L0100 ELASTIC SUPPORT, ELASTIC STOCKING, FULL LENGTH, HEAVY
SURGICAL WEIGHT (LINTON TYPE OR EQUAL), EACH

L0190 ELASTIC SUPPORT, ELASTIC STOCKING, LEOTARDS, MEDIUM
WEIGHT, EACH

L0200 ELASTIC SUPPORT, ELASTIC STOCKING, LEOTARDS, SURGICAL
WEIGHT (LINTON TYPE), EACH

L0210 ELASTIC SUPPORT, ELASTIC STOCKING, CUSTOM MADE

L0220 ELASTIC SUPPORT, ELASTIC STOCKING, LYMPHEDEMA

L0230 ELASTIC SUPPORT, ELASTIC STOCKING, GARTER BELT

GENERAL - TRUSSES - L0300-L0399

L0300 TRUSS, SINGLE WITH STANDARD PAD

L0310 TRUSS, DOUBLE WITH STANDARD PADS

L0320 TRUSS, ADDITION TO STANDARD PAD, WATER PAD

L0330 TRUSS, ADDITION TO STANDARD PAD, SCROTAL PAD

PROSTHETIC SOCKS - L0400-L0499

L0400 PROSTHETIC SHEATH, BELOW KNEE, EACH

L0410 PROSTHETIC SHEATH, ABOVE KNEE, EACH

L0415 PROSTHETIC SHEATH, UPPER LIMB, EACH

L0420 PROSTHETIC SOCK, WOOL, BELOW KNEE, EACH

L0430 PROSTHETIC SOCK, WOOL, ABOVE KNEE, EACH

L0435 PROSTHETIC SOCK, WOOL, UPPER LIMB, EACH

M/D=1189 A/C=F COV=M DCA
CIM=60-9 F/D RI
NCM 2133

M/D=1189 A/C=F COV=M DCA
CIM=60-9 F/D RI
NCM 2133

M/D=1189 A/C=F COV=M DCA
CIM=60-9 F/D RI
NCM 2133

M/D=1189 A/C=F COV=M DCA
CIM=60-9 F/D RI
NCM 2133

M/D=1189 A/C=F COV=M DCA
CIM=60-9 F/D RI
NCM 2133

M/D=1189 A/C=F COV=M DCA
CIM=60-9 F/D RI
NCM 2133

M/D=1187 A/C=E COV DCA

M/D=1187 A/C=E COV DCA

M/D=1187 A/C=C COV DCA

M/D=1187 A/C=C COV DCA

M/D=1181 A/C COV DCA

M/D=1181 A/C COV DCA

M/D=1187 A/C=A COV DCA

M/D=1181 A/C COV DCA

M/D=1181 A/C COV DCA

M/D=1187 A/C=A COV DCA

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HCFA COMMON PROCEDURE CODING SYSTEM

L8440 PROSTHETIC SHRINKER, BELOW KNEE, EACH
 L8460 PROSTHETIC SHRINKER, ABOVE KNEE, EACH
 L8465 PROSTHETIC SHRINKER, UPPER LIMB, EACH
 L8470 STUMP SOCK, SINGLE PLY, FITTING, BELOW KNEE, EACH
 L8480 STUMP SOCK, SINGLE PLY, FITTING, ABOVE KNEE, EACH
 L8499 UNLISTED PROCEDURE FOR MISCELLANEOUS PROSTHETIC
 SERVICES
 L8500 ARTIFICIAL LARYNX, ANY TYPE
 L8501 TRACHEOSTOMY SPEAKING VALVE
 TAXES
 L9999 SALES TAX, ORTHOTIC/PROSTHETIC/ OTHER

*	M/D=1181	A/C	COV	DCA
*				
*	M/D=1181	A/C	COV	DCA
*				
*	M/D=1187	A/C=A	COV	DCA
*				
*	M/D=1181	A/C	COV	DCA
*				
*	M/D=1181	A/C	COV	DCA
*				
*	M/D=1181	A/C	COV	DCA
*				
*	M/D=1189	A/C=A	COV=D	DCA=90
*	CIM=65-5		F/D	RI
*	MCM	2130		
*				
*	M/D=1189	A/C=A	COV=D	DCA=90
*	CIM=65-16		F/D	RI
*				
*				
*				
*	M/D=1181	A/C	COV	DCA

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HCFA COMMON PROCEDURE CODING SYSTEM

HCFA ASSIGNMENT OF OFFICE SERVICES M0000 - M0009
 NOTE: PERIODIC, ROUTINE OR ANNUAL TYPE EXAMINATIONS ARE
 PREVENTATIVE TYPE SERVICES. THE FOLLOWING PROCEDURE
 CODES SHOULD BE USED WHEN SERVICES RENDERED FALL INTO
 THIS CATEGORY.

M0005	OFFICE VISITS WITH TWO OR MORE MODALITIES TO THE SAME AREA	M/D=1184	A/C	COV	DCA
M0006	OFFICE VISITS WITH ONE OF THE ABOVE MENTIONED TREATMENT MODALITIES, EACH ADDITIONAL 15 MINUTES	M/D=1184	A/C	COV	DCA
M0007	OFFICE VISIT INCLUDING COMBINATION OF ANY MODALITY(S) AND PROCEDURE(S), INITIAL 30 MINUTES	M/D=1184	A/C=A	COV	DCA
M0008	OFFICE VISIT INCLUDING COMBINATION OF ANY MODALITY(S) AND PROCEDURE(S), EACH ADDITIONAL 15 MINUTES	M/D=1184	A/C	COV	DCA
M0009	NOT OTHERWISE CLASSIFIED, OFFICE VISITS	M/D=1188	A/C=C	COV	DCA
HCFA ASSIGNMENT HOME VISITS	M0010 - M0019	M/D=	986	A/C=A	DCA
M0019	NOT OTHERWISE CLASSIFIED, HOME VISITS	M/D=1184	A/C=A	COV	DCA
HCFA ASSIGNMENT HOSPITAL VISITS	M0020 - M0029	M/D=	986	A/C=A	DCA
M0021	PER DIEM INPATIENT HOSPITAL CARE WHEN ONE OR MORE VISITS ARE MADE PER 24 HOUR PERIOD	M/D=1185	A/C=A	COV	DCA
M0022	I.C.U. CARE FOLLOW-UP WHEN ONE OR MORE VISITS ARE MADE PER 24 HOUR PERIOD	M/D=1185	A/C=A	COV	DCA
M0023	ROUTINE NEWBORN CARE, INHOSPITAL, INITIAL VISIT ONLY	M/D=1188	A/C=C	COV	DCA
M0024	CHEMOTHERAPY(FOR MALIGNANCIES, FOLLOW-UP VISIT FOR PURPOSES OF MONITORING)	M/D=1188	A/C=C	COV	DCA
M0029	NOT OTHERWISE CLASSIFIED, HOSPITAL VISITS	M/D=1184	A/C	COV	DCA
HCFA ASSIGNMENT SNF, ICF, OTHER LONG TERM CARE FACILITY VISITS	M0030-M0049	M/D=1189	A/C	C	DCA
M0039	NOT OTHERWISE CLASSIFIED, SNF, ECF, OR ICF VISITS	M/D=1184	A/C	COV	DCA
M0049	NOT OTHERWISE CLASSIFIED, NH, BOARDING HOME, DOMICILIARY, CUSTODIAL CARE FACILITY	M/D=1185	A/C=C	COV	DCA

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HCFA COMMON PROCEDURE CODING SYSTEM

HCFA ASSIGNMENT ASC SERVICES MO050 - MO054

MO050 AMBULATORY SURGICAL CENTER FACILITY CHARGE (ASC) GROUP 1

MO051 AMBULATORY SURGICAL CENTER FACILITY CHARGE (ASC) GROUP 2

MO052 AMBULATORY SURGICAL CENTER FACILITY CHARGE (ASC) GROUP 3

MO053 AMBULATORY SURGICAL CENTER FACILITY CHARGE (ASC) GROUP 4

MO054 AMBULATORY SURGICAL CENTER FACILITY CHARGE (ASC) NOT OTHERWISE CLASSIFIED

MO059 NOT OTHERWISE CLASSIFIED, EMERGENCY ROOM SERVICES

HCFA ASSIGNMENT OF OTHER MEDICAL SERVICES MO070 - MO199

MO070 INSULIN SHOCK THERAPY, HYPOGLYCEMIA, SUBCOMA, PER TREATMENT

MO071 ORTHOMOLECULAR THERAPY

MO072 IMMUNOTHERAPY FOR MALIGNANT DISEASE

MO075 CELLULAR THERAPY

MO076 PROLOTERAPY

MO080 HYPERTHERMIA THERAPY (TO INCLUDE SYSTEMIC THERMOTHERAPY, REGIONAL HYPERTHERMIA, OR WHOLE BODY HYPERTHERMIA FOR TREATMENT OF MALIGNANCIES)

MO100 INTRAGASTRIC HYPOTHERMIA USING GASTRIC FREEZING (MNP)

MO101 CUTTING OR REMOVAL OF CORNS, CALLUSES AND/OR TRIMMING OF NAILS, APPLICATION OF SKIN CREAMS AND OTHER HYGENIC AND PREVENTIVE MAINTENANCE CARE

HCFA ASSIGNMENT OF OTORHINOLARYNGOLOGIC SERVICES MO250-MO299

MO260 TONSILLECTOMY, WITH OR WITHOUT ADENOIDECTOMY, WITH UNILATERAL MYRINGOTOMY AND TUBE INSERTION

M/D= 986 A/C=A DCA

M/D=1188 A/C=D COV DCA
MCM 4171.1M/D=1188 A/C=D COV DCA
MCM 4171.1M/D=1188 A/C=D COV DCA
MCM 4171.1M/D=1188 A/C=D COV DCA
MCM 4171.1

M/D=1188 A/C=D COV DCA

M/D=1184 A/C COV DCA

M/D=1184 A/C COV DCA

M/D=1188 A/C=C COV DCA

M/D=1189 A/C=F COV=C DCA
MCM 2050.5M/D=1188 A/C=C COV=M DCA
CIM=35-5 F/D RIM/D=1189 A/C=F COV=M DCA
CIM=35-13 F/D RIM/D=1188 A/C=C COV=D DCA
CIM=35-49 F/D RIM/D=1188 A/C=E COV=M DCA
CIM=35-65 F/D RIM/D=1189 A/C=F COV=D DCA
MCM 2323C

M/D=1188 A/C=C COV DCA

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MO281 TONSILLECTOMY, WITH OR WITHOUT ADENOIDECTOMY, WITH BILATERAL
MYRINGOTOMY AND TUBE INSERTION

MO299 NOT OTHERWISE CLASSIFIED, SPECIAL OTORHINOLARYNGOLOGIC SERVICES

HCFA ASSIGNMENT CARDIOVASCULAR SERVICES MO300 - MO399

MO300 IV CHELATION THERAPY (CHEMICAL ENDARTERECTOMY)

MO301 FABRIC WRAPPING OF ABDOMINAL ANEURYSM (MNP)

MO399 NOT OTHERWISE CLASSIFIED, CARDIOVASCULAR SERVICES

HCFA COMMON PROCEDURE CODING SYSTEM

*	M/D=1188	A/C=C	COV	DCA
*				
*	M/D=1189	A/C=D	COV	DCA
*	XR1=92599	XR2		XR3
*				
*	M/D= 986	A/C=A		DCA
*				
*	M/D=1188	A/C=E	COV=M	DCA
*	CIM=35-64		F/D	RI
*	M/D=1188	A/C=E	COV=M	DCA
*	CIM=35-34		F/D	RI
*				
*	M/D=1189	A/C=D	COV	DCA
*	XR1=93799	XR2		XR3

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HCFA COMMON PROCEDURE CODING SYSTEM

HCFA ASSIGNMENT OF SPECIAL DIAGNOSTIC PROCEDURES M0500 - M0599

M0520 ELECTRONIC PACEMAKER ANALYSIS, PULSE MONITOR

M0525 SINGLE LEAD EKG WITH ANALYSIS OF PACEMAKER RATE

M0526 COMPUTER TRACING AND INTERPRETATION OF ECGs

M0530 CARDIAC EVENTS RECORDER, ELECTROCARDIOGRAPHIC MONITORING,
NON-CONTINUOUS, UP TO 12 HOURS

M0535 CARDIAC EVENTS RECORDER, ELECTROCARDIOGRAPHIC MONITORING,
NON-CONTINUOUS, 12 THRU 24 HOURS

M0540 SIGNAL-AVERAGING EKG

M0560 PNEUMOPLETHYSMOGRAPHY VENOUS OCCLUSIVE

M0575 ELECTROENCEPHALOGRAM (EEG), INTERPRETATION AND REPORT ONLY

M0580 TRANSTELEPHONIC ELECTROENCEPHALOGRAMS; COMPLETE PROCEDURE

M0585 ACHILLES REFLEX RESPONSE, ELECTRICAL RECORDING (ART)

M0590 MONITORING ECG, EEG OR PRESSURE IN INTRATHORACTIC OR OTHER
CRITICAL SURGERY, PER HOUR

M0592 NON-INVASIVE EAR OR PULSE OXIMETRY

HCFA ASSIGNMENT OF PSYCHOLOGICAL TESTING SERVICES M0600-M0649

M0601 PSYCHOLOGICAL TESTING, WITH WRITTEN REPORT, PER HOUR

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*
*
*      M/D=1185 A/C=A CDV      DCA
*      CNTS      RVU=      2.00 A/V
*
*      M/D=1184 A/C      CDV      DCA
*      CNTS      RVU=      8.00 A/V
*
*      M/D=1188 A/C=E CDV=D      DCA
*      CIM=50-15      F/D      RI
*
*      M/D=1189 A/C=C CDV=D      DCA
*      CNTS      RVU=      32.00 A/V
*      CIM=50-15      F/D      RI
*
*      M/D=1188 A/C=C CDV=D      DCA
*      CNTS      RVU=      44.80 A/V
*      CIM=50-15      F/D      RI
*
*      M/D=1188 A/C=A CDV      DCA
*
*      M/D=1188 A/C=C CDV=D      DCA
*      CNTS      RVU=      BR A/V
*      CIM=50-6      F/D      RI
*
*      M/D=1188 A/C=C CDV      DCA
*
*      M/D=1188 A/C=C CDV=D      DCA
*      CIM=50-39      F/D      RI
*
*      M/D=1188 A/C=C CDV      DCA
*
*      M/D=1188 A/C=C CDV      DCA
*
*      M/D=1188 A/C=D CDV      DCA
*      XR1=94760 XR2      XR3
*
*
*      M/D=1185 A/C=A CDV      DCA

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HCFA COMMON PROCEDURE CODING SYSTEM

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M/D=1184 A/C COV DCA
CNTS RVU=RNE A/V

ML/D=1184	A/C	COV	DCA
CNTS		RVU=RNE	A/V

M/D=1188 A/C=E COV DCA
CNTS RVU=RNE A/V

M/D=1184 A/C COV DCA
CNTS RVU=RNE A/V

M/D=1184 A/C COV DCA
CNTS RVU=RNE A/V

M/D=1184 A/C COV DCA
CNTS RVU=RNE A/V

M/D=1184	A/C	COV	DCA
CNTS		RVU=RNE	A/Y

M/D=1184 A/C COV DCA
CNTS RVU=RNE A/V

M/D=1184 A/C COV DCA
CNTS RVU=RNE A/V

M/D=1184 A/C COV DCA
CNTS RVU=RNE A/V

M/D=1184 A/C COV DCA

NOTE: FOR DME ITEMS FOR ESRD, SEE PROCEDURES CODES E1500-E1699.
FOR SUPPLIES FOR ESRD, SEE PROCEDURES CODES A4650-A4999.

MO900 EXCISION, REVISION OR REMOVAL OF A-V SHUNT ANASTOMOSIS WITH OR WITHOUT GRAFT

CATHETER INSERTION

MO910 INSERTION CATHETERS FEMORAL VEIN,
UNILATERAL OR BILATERAL FOR DIALYSIS

DIALYSIS - INPATIENT HOSPITAL SERVICES

ACUTE STAGE - HEMODIALYSIS

MO916 HEMODIALYSIS FOR ACUTE RENAL FAILURE AND/OR INTOXICATION,
PER TREATMENT

SUB-ACUTE - HEMODIALYSIS

MO920 HEMODIALYSIS FOR SUB-ACUTE OR STABILIZATION, PER TREATMENT

MAINTENANCE PATIENT - HEMODIALYSIS TREATMENT SLIGHTLY ABOVE
MAINTENANCE LEVEL OF CARE

MO928 HEMODIALYSIS, MAINTENANCE, FOR A PATIENT WHO IS HOSPITALIZED FOR
A PROBLEM RELATED OR UNRELATED TO RENAL FAILURE, PER TREATMENT

ACUTE STAGE - PERITONEAL DIALYSIS

MO931 PERITONEAL DIALYSIS--ACUTE RENAL FAILURE, INCLUDES CATHETER INSERTION

MO932 PERITONEAL DIALYSIS FOR ACUTE RENAL FAILURE AND/OR
INTOXICATION, EXCLUDING CANNULA AND/OR CATHETER INSERTION,
PER HOUR

SUB-ACUTE STAGE - PERITONEAL DIALYSIS

MO936 PERITONEAL DIALYSIS, SUB-ACUTE OR STABILIZATION, EXCLUDING
CANNULA AND/OR CATHETER INSERTION, PER HOUR

MO937 PERITONEAL DIALYSIS, MAINTENANCE FOR A PATIENT WHO IS HOSPITAL-
IZED FOR A PROBLEM RELATED OR UNRELATED TO RENAL FAILURE,
PER HOUR

M/D=1181 A/C COV DCA
CNTS RVU= 93.63 A/V= .8

M/D=1188 A/C=C COV=D DCA
CNTS RVU= 72.23 A/V
CIM=60-9 F/D RI
MCM 5037.1

M/D=1187 A/C=D COV DCA
CNTS RVU= 96.20 A/V
MCM 5211.1

M/D=1187 A/C=D COV DCA
CNTS RVU= 57.60 A/V
MCM 5211.1

M/D=1187 A/C=D COV DCA
CNTS RVU= 19.20 A/V
MCM 5211.1

M/D=1187 A/C=D COV DCA
MCM 5211.1

M/D=1187 A/C=D COV DCA
CNTS RVU= 13.40 A/V
MCM 5211.1

M/D=1187 A/C=D COV DCA
CNTS RVU= 9.60 A/V
MCM 5211.1

M/D=1187 A/C=D COV DCA
CNTS RVU= 5.70 A/V
MCM 5211.1

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HCFA COMMON PROCEDURE CODING SYSTEM

OUTPATIENT MAINTENANCE DIALYSIS

MONTHLY CAPITATION PAYMENT METHOD

MO945 OUTPATIENT DIALYSIS RELATED PHYSICIANS' SERVICES
EITHER PROVIDED BY THE PHYSICIAN PRIMARILY
RESPONSIBLE FOR TOTAL DIALYSIS CARE OR
UNDER HIS/HER DIRECTION, ON MONTHLY BASIS

SELF DIALYSIS TRAINING

MO974 SELF DIALYSIS TRAINING, ANY MODE, COMPLETED COURSE

MO978 SELF DIALYSIS TRAINING, ANY MODE, COURSE NOT COMPLETED,
PER TRAINING SESSION

MO994 DIAFILTRATION AND/OR HEMOFILTRATION

MO999 NOT OTHERWISE CLASSIFIED, CRITICAL CARE

M/D=1189 A/C=F COV DCA
MCM 5037

M/D=1185 A/C=C COV DCA
CHTS RVU= 96.20 A/V
MCM 5037.6

M/D=1185 A/C=C COV DCA
CHTS RVU= 6.25 A/V
MCM 5037.6

M/D=1189 A/C=D COV=D DCA
XR1=90945 XR2=90947 XR3
CHTS RVU= RNE A/V
CIN=35-3B F/D RI

M/D=1189 A/C=D COV DCA
XR1=99199 XR2 XR3

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HCFA COMMON PROCEDURE CODING SYSTEM

HCFA ASSIGNMENT OF AUTOMATED LABORATORY TEST P0000 - P0999

P0999 NOT OTHERWISE CLASSIFIED, SPECIAL PATHOLOGY SERVICES

HCFA ASSIGNMENT OF CHEMISTRY AND TOXICOLOGY TESTS P2000 - P4999

P2028 CEPHALIN FLOCCULATION, BLOOD

P2029 CONGO RED, BLOOD

P2031 HAIR ANALYSIS (EXCLUDING ARSENIC)

P2032 ICTERUS INDEX, BLOOD

P2033 THYMOL TURBIDITY, BLOOD

P2038 MUCOPROTEIN, BLOOD (SEROMUCOID) (MEDICAL NECESSITY PROCEDURE)

HCFA ASSIGNMENT OF MICROBIOLOGY TESTS P7000 - P7999

P7001 CULTURE, BACTERIAL, URINE; QUANTITATIVE, SENSITIVITY STUDY

P7020 VACCINE, AUTOGENOUS (MEDICAL NECESSITY PROCEDURE)

M/D=1189 A/C=D COV DCA
 XR1=89399 XR2 XR3

M/D=1189 A/C=F COV=D DCA
 CIN=50-34 F/D RI

M/D=1189 A/C=F COV=D DCA
 CIN=50-34 F/D RI

M/D=1188 A/C=E COV=M DCA
 CIN=50-24 F/D RI

M/D=1188 A/C=C COV DCA

M/D=1189 A/C=F COV=D DCA
 CIN=50-34 F/D RI

M/D=1189 A/C=F COV=D DCA
 ILC=330 SP SA
 CIN=50-34 F/D RI

M/D= 986 A/C=C COV DCA
 ILC=110 SP SA

M/D= 986 A/C=E COV DCA
 CNTS=0006 RVU A/V

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HCFA COMMON PROCEDURE CODING SYSTEM

HCFA ASSIGNMENT OF MISCELLANEOUS PATH. + LAB TEST P9000 - P9999

P9005 ADMINISTRATION FEE CHARGE BY A PROVIDER FOR SUPPLYING BLOOD OR
BLOOD DERIVATIVES TO THE PHYSICIAN OFFICE FOR TRANSFUSION

P9006 MULTIPLE PATHOLOGY SERVICES

P9007 HANDLING CHARGE FOR PURCHASED LAB SERVICES BLOOD ONLY

P9010 BLOOD (WHOLE), FOR TRANSFUSION, PER UNIT

P9011 BLOOD (SPLIT UNIT), SPECIFY AMOUNT

P9012 CRYOPRECIPITATE, EACH UNIT

P9013 FIBRINOGEN UNIT

P9014 GLOBULIN, GAMMA, 1 ML.

P9015 GLOBULIN, RH IMMUNE, 1 ML.

P9016 LEUKOCYTE POOR BLOOD, EACH UNIT

P9017 PLASMA, SINGLE DONOR, FRESH FROZEN, EACH UNIT

P9018 PLASMA PROTEIN FRACTION, EACH UNIT

P9019 PLATELET CONCENTRATE, EACH UNIT

P9020 PLATELET RICH PLASMA, EACH UNIT

P9021 RED BLOOD CELLS, EACH UNIT

P9022 WASHED RED BLOOD CELLS, EACH UNIT

M/D=1189 A/C=F COV=D DCA
CHTS RVU= 27.70 A/V
MCM 2455 B

M/D=1189 A/C=C COV DCA

M/D=1189 A/C=F COV=D DCA
MCM 2455 B

M/D=1189 A/C=F COV=D DCA
MCM 2455A

M/D=1189 A/C=F COV=D DCA
MCM 2455A

M/D=1189 A/C=F COV=D DCA
MCM 2455 B

M/D=1189 A/C=F COV=D DCA
MCM 2455 B

M/D=1189 A/C=F COV=D DCA
MCM 2455 B

M/D=1189 A/C=F COV=D DCA
MCM 2455 B

M/D=1189 A/C=F COV=D DCA
MCM 2455 B

M/D=1189 A/C=F COV=D DCA
MCM 2455 B

M/D=1189 A/C=F COV=D DCA
MCM 2455 B

M/D=1189 A/C=F COV=D DCA
MCM 2455 B

M/D=1189 A/C=F COV=D DCA
MCM 2455 B

M/D=1189 A/C=F COV=D DCA
MCM 2455A

M/D=1189 A/C=F COV=D DCA
MCM 2455A

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HCFA COMMON PROCEDURE CODING SYSTEM

P9023 FACTOR VIII CONCENTRATE, LYOPHILIZED UNIT, 100 UNITS

P9024 FACTOR VIII DILUTION, EACH BOTTLE.

P9603 TRAVEL ALLOWANCE ONE WAY IN CONNECTION WITH MEDICALLY NECESSARY LABORATORY SPECIMEN COLLECTION DRAWN FROM HOME BOUND OR NURSING HOME BOUND PATIENT; PRORATED MILES ACTUALLY TRAVELLED.

P9604 TRAVEL ALLOWANCE ONE WAY IN CONNECTION WITH MEDICALLY NECESSARY LABORATORY SPECIMEN COLLECTION DRAWN FROM HOME BOUND OR NURSING HOME BOUND PATIENT; PRORATED TRIP CHARGE.

P9605 ROUTINE VENIPUNCTURE FOR COLLECTION OF SPECIMEN (S), SINGLE HOME BOUND, NURSING HOME, OR SNF PATIENT

P9610 CATHETERIZATION FOR COLLECTION OF SPECIMEN (S), SINGLE HOME BOUND, NURSING HOME, OR SNF PATIENT

P9615 CATHETERIZATION FOR COLLECTION OF SPECIMEN (S) (MULTIPLE PATIENTS)

M/D=1189 A/C=F COV=D DCA
MCM 2050.5M/D=1189 A/C=F COV=D DCA
MCM 2050.5M/D=1189 A/C=F COV=D DCA
MCM 2070.1 3628M/D=1189 A/C=F COV=D DCA
MCM 2070.1 3628M/D=1189 A/C=F COV=D DCA
MCM 2051.B 2070.1 3628.EM/D=1189 A/C=F COV=D DCA
MCM 3628EM/D=1189 A/C=F COV=D DCA
MCM 3628

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HCFA COMMON PROCEDURE CODING SYSTEM

THIS SECTION CONTAINS NATIONAL CODES ASSIGNED BY HCFA ON A TEMPORARY BASIS.
THE LIST CONTAINS CURRENT CODES, AS WELL AS THOSE WHICH HAVE BEEN SUPERCEDED
BY PERMANENT ALPHA-NUMERIC CODES AS INDICATED IN THE CROSS-REFERENCE FIELD.

Q0004 AZATHIOPRINE (E.G., IMURAN) - ORAL, TAB, 50 MG., 100S EA

Q0005 AZATHIOPRINE (E.G., IMURAN) - PARENTERAL, VIAL, 100 MG., 20 ML EA

Q0006 CYCLOSPORINE (E.G., SANDIMMUNE) - ORAL, SOL; 100 MG/ML, 50 ML, EA

Q0007 CYCLOSPORINE (E.G., SANDIMMUNE) - PARENTERAL, AMP, IV, 250 MG, 5 ML, 10S EA UD

Q0008 LYMPHOCYTE IMMUNE GLOBULIN, ANTITUMORCYTE GLOBULIN (E.G., ATGAM) - PARENTERAL,
AMP, 50 MG/ML, 5 ML EA

Q0009 MONOCLONAL ANTIBODIES (E.G., MURDOMNAB CD3; ORTHOCLOME) - PARENTERAL,
AMP, 5 MG/5 ML, 5 ML EA

Q0010 PNEUMATIC COMPRESSOR, SEGMENTAL HOME MODEL (LYMPHEDEMA PUMP)
WITHOUT CALIBRATED GRADIENT PRESSURE

Q0011 PNEUMATIC COMPRESSOR, SEGMENTAL HOME MODEL (LYMPHEDEMA PUMP) WITH
CALIBRATED GRADIENT PRESSURE

Q0012 PNEUMATIC APPLIANCE FOR USE WITH SEGMENTAL PNEUMATIC COMPRESSOR, LEG

Q0013 PNEUMATIC APPLIANCE FOR USE WITH SEGMENTAL PNEUMATIC COMPRESSOR, ARM

Q0014 OXYGEN CONCENTRATOR, MANUFACTURER SPECIFIED MAXIMUM FLOW RATE DOES NOT
EXCEED 2 LITERS PER MINUTE, AT 85 PERCENT OR GREATER CONCENTRATION

Q0015 OXYGEN CONCENTRATOR, MANUFACTURER SPECIFIED MAXIMUM FLOW RATE GREATER
THAN 2 LITERS PER MINUTE, DOES NOT EXCEED 3 LITERS PER MINUTE, AT 85 PERCENT
OR GREATER CONCENTRATION

Q0016 OXYGEN CONCENTRATOR, MANUFACTURER SPECIFIED MAXIMUM FLOW RATE GREATER
THAN 3 LITERS PER MINUTE, DOES NOT EXCEED 4 LITERS PER MINUTE, AT 85 PERCENT
OR GREATER CONCENTRATION

Q0017 OXYGEN CONCENTRATOR, MANUFACTURER SPECIFIED MAXIMUM FLOW RATE GREATER THAN
4 LITERS PER MINUTE, DOES NOT EXCEED 5 LITERS PER MINUTE, AT 85 PERCENT
OR GREATER CONCENTRATION

*	M/D=1188 A/C=C	DCA
*	M/D=1187 A/C=A	DCA
*	M/D=1187 A/C=A	DCA
*		
*	M/D=1187 A/C=D COV	DCA
*	XR1=J7500 XR2	XR3
*		
*	M/D=1187 A/C=D COV	DCA
*	XR1=J7501 XR2	XR3
*		
*	M/D=1187 A/C=D COV	DCA
*	XR1=J7502 XR2	XR3
*		
*	M/D=1187 A/C=D COV	DCA
*	XR1=J7503 XR2	XR3
*		
*	M/D=1187 A/C=D COV	DCA
*	XR1=J7504 XR2	XR3
*		
*	M/D=1187 A/C=D COV	DCA
*	XR1=J7505 XR2	XR3
*		
*	M/D=1187 A/C=D COV	DCA
*	XR1=E0651 XR2	XR3
*		
*	M/D=1187 A/C=D COV	DCA
*	XR1=E0652 XR2	XR3
*		
*	M/D=1187 A/C=D COV	DCA
*	XR1=E0667 XR2	XR3
*		
*	M/D=1187 A/C=D COV	DCA
*	XR1=E0668 XR2	XR3
*		
*	M/D=1187 A/C=D COV	DCA
*	XR1=E1400 XR2	XR3
*		
*	M/D=1187 A/C=D COV	DCA
*	XR1=E1401 XR2	XR3
*		
*		
*	M/D=1187 A/C=D COV	DCA
*	XR1=E1402 XR2	XR3
*		
*		
*	M/D=1187 A/C=D COV	DCA
*	XR1=E1403 XR2	XR3
*		
*		

Q0018	OXYGEN CONCENTRATOR, MANUFACTURER SPECIFIED MAXIMUM FLOW RATE GREATER THAN 5 LITERS PER MINUTE, AT 85 PERCENT OR GREATER CONCENTRATION	*	M/D=1187 A/C=D	COV	DCA
		*	XR1=E1404 XR2		XR3
Q0019	ELECTROCARDIOGRAPHIC MONITORING FOR 24 HOURS BY CONTINUOUS ORIGINAL ECG WAVEFORM RECORDING AND STORAGE, WITH VISUAL SUPERIMPOSITION SCANNING; INCLUDES RECORDING, SCANNING ANALYSIS WITH REPORT, PHYSICIAN REVIEW AND INTERPRETATION	*	M/D=1189 A/C=D	COV=D	DCA
		*	XR1=93224 XR2		XR3
		*	CIM=50-15	F/D	RI
Q0020	ELECTROCARDIOGRAPHIC MONITORING FOR 24 HOURS BY CONTINUOUS ORIGINAL ECG WAVEFORM RECORDING AND STORAGE, WITH VISUAL SUPERIMPOSITION SCANNING; RECORDING ONLY	*	M/D=1189 A/C=D	COV=D	DCA
		*	XR1=93225 XR2		XR3
		*	CIM=50-15	F/D	RI
Q0021	ELECTROCARDIOGRAPHIC MONITORING FOR 24 HOURS BY CONTINUOUS ORIGINAL ECG WAVEFORM RECORDING AND STORAGE, WITH VISUAL SUPERIMPOSITION SCANNING; SCANNING ANALYSIS WITH REPORT	*	M/D=1189 A/C=D	COV=D	DCA
		*	XR1=93226 XR2		XR3
		*	CIM=50-15	F/D	RI
Q0022	ELECTROCARDIOGRAPHIC MONITORING FOR 24 HOURS BY CONTINUOUS ORIGINAL ECG WAVEFORM RECORDING AND STORAGE, WITH VISUAL SUPERIMPOSITION SCANNING; PHYSICIAN REVIEW AND INTERPRETATION	*	M/D=1189 A/C=D	COV=D	DCA
		*	XR1=93227 XR2		XR3
		*	CIM=50-15	F/D	RI
Q0023	ELECTROCARDIOGRAPHIC MONITORING FOR 24 HOURS BY CONTINUOUS ORIGINAL ECG WAVEFORM RECORDING AND STORAGE WITHOUT SUPERIMPOSITION SCANNING UTILIZING A DEVICE CAPABLE OF PRODUCING A FULL MINIATURIZED PRINTOUT; INCLUDES RECORDING, MICROPROCESSOR-BASED ANALYSIS WITH REPORT, PHYSICIAN REVIEW AND INTERPRETATION	*	M/D=1189 A/C=D	COV=D	DCA
		*	XR1=93230 XR2		XR3
		*	CIM=50-15	F/D	RI
Q0024	ELECTROCARDIOGRAPHIC MONITORING FOR 24 HOURS BY CONTINUOUS ORIGINAL ECG WAVEFORM RECORDING AND STORAGE WITHOUT SUPERIMPOSITION SCANNING UTILIZING A DEVICE CAPABLE OF PRODUCING A FULL MINIATURIZED PRINTOUT; RECORDING ONLY	*	M/D=1189 A/C=D	COV=D	DCA
		*	XR1=93225 XR2		XR3
		*	CIM=50-15	F/D	RI
Q0025	ELECTROCARDIOGRAPHIC MONITORING FOR 24 HOURS BY CONTINUOUS ORIGINAL ECG WAVEFORM RECORDING AND STORAGE WITHOUT SUPERIMPOSITION SCANNING UTILIZING A DEVICE CAPABLE OF PRODUCING A FULL MINIATURIZED PRINTOUT; MICROPROCESSOR-BASED ANALYSIS WITH REPORT	*	M/D=1189 A/C=D	COV=D	DCA
		*	XR1=93232 XR2		XR3
		*	CIM=50-15	F/D	RI
Q0026	ELECTROCARDIOGRAPHIC MONITORING FOR 24 HOURS BY CONTINUOUS ORIGINAL ECG WAVEFORM RECORDING AND STORAGE WITHOUT SUPERIMPOSITION SCANNING UTILIZING A DEVICE CAPABLE OF PRODUCING A FULL MINIATURIZED PRINTOUT; PHYSICIAN REVIEW AND INTERPRETATION	*	M/D=1189 A/C=D	COV=D	DCA
		*	XR1=93233 XR2		XR3
		*	CIM=50-15	F/D	RI
Q0027	ELECTROCARDIOGRAPHIC MONITORING FOR 24 HOURS BY CONTINUOUS COMPUTERIZED MONITORING AND REAL-TIME DATA ANALYSIS UTILIZING A DEVICE CAPABLE OF PRODUCING 75 OR MORE FIVE-SECOND FULL-SIZED WAVEFORM TRACINGS; INCLUDES MONITORING AND REAL-TIME DATA ANALYSIS WITH REPORT, PHYSICIAN REVIEW AND INTERPRETATION	*	M/D=1189 A/C=D	COV=D	DCA
		*	XR1=93235 XR2		XR3
		*	CIM=50-15	F/D	RI
Q0028	ELECTROCARDIOGRAPHIC MONITORING FOR 24 HOURS BY CONTINUOUS COMPUTERIZED MONITORING AND REAL-TIME DATA ANALYSIS UTILIZING A DEVICE CAPABLE OF PRODUCING 75 OR MORE FIVE-SECOND FULL-SIZED WAVEFORM TRACINGS; MONITORING AND REAL-TIME DATA ANALYSIS WITH REPORT	*	M/D=1189 A/C=D	COV=D	DCA
		*	XR1=93236 XR2		XR3
		*	CIM=50-15	F/D	RI
Q0029	ELECTROCARDIOGRAPHIC MONITORING FOR 24 HOURS BY CONTINUOUS COMPUTERIZED MONITORING AND REAL-TIME DATA ANALYSIS UTILIZING A DEVICE CAPABLE OF PRODUCING 75 OR MORE FIVE-SECOND FULL-SIZED WAVEFORM TRACINGS; PHYSICIAN REVIEW AND INTERPRETATION	*	M/D=1189 A/C=D	COV=D	DCA
		*	XR1=93237 XR2		XR3
		*	CIM=50-15	F/D	RI

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HCFA COMMON PROCEDURE CODING SYSTEM

Q0030	ELECTROCARDIOGRAPHIC MONITORING FOR 24 HOURS BY CONTINUOUS COMPUTERIZED MONITORING AND REAL-TIME DATA ANALYSIS UTILIZING A DEVICE, CAPABLE OF PRODUCING UP TO 75 FIVE-SECOND FULL-SIZED WAVEFORM TRACINGS; INCLUDES MONITORING AND REAL-TIME DATA ANALYSIS WITH REPORT, PHYSICIAN REVIEW AND INTERPRETATION	*	M/D=1188 A/C=D	COV=D	DCA
		*	XR1=93235	XR2	XR3
		*	CIN=50-15	F/D	RI
Q0031	ELECTROCARDIOGRAPHIC MONITORING FOR 24 HOURS BY CONTINUOUS COMPUTERIZED MONITORING AND REAL-TIME DATA ANALYSIS UTILIZING A DEVICE, CAPABLE OF PRODUCING UP TO 75 FIVE-SECOND FULL SIZED WAVEFORM TRACINGS; MONITORING AND REAL-TIME DATA ANALYSIS WITH REPORT	*	M/D=1188 A/C=D	COV=D	DCA
		*	XR1=93236	XR2	XR3
		*	CIN=50-15	F/D	RI
Q0032	ELECTROCARDIOGRAPHIC MONITORING FOR 24 HOURS BY CONTINUOUS COMPUTERIZED MONITORING AND REAL-TIME DATA ANALYSIS UTILIZING A DEVICE, CAPABLE OF PRODUCING UP TO 75 FIVE-SECOND FULL-SIZED WAVEFORM TRACINGS; PHYSICIAN REVIEW AND INTERPRETATION	*	M/D=1188 A/C=D	COV=D	DCA
		*	XR1=93237	XR2	XR3
		*	CIN=50-15	F/D	RI
Q0033	LINDZ V. BOWEN AMBULANCE REIMBURSEMENT	*	M/D=1188 A/C=A	COV=D	DCA
Q0034	ADMINISTRATION OF INFLUENZA VACCINE TO MEDICARE BENEFICIARIES BY PARTICIPATING DEMONSTRATION SITES	*	M/D=1188 A/C=A	COV=D	DCA
Q0035	CARDIOKYMNOGRAPHY	*	M/D=1188 A/C=A	COV=D	DCA
		*	MCM	50-49	
Q0036	OXYGEN CONCENTRATOR, HIGH HUMIDITY	*	M/D=1188 A/C=A	COV=D	DCA
		*	MCM	4107.9	
Q0037	OXYGEN AND WATER VAPOR ENRICHING SYSTEM	*	M/D=1188 A/C=A	COV=D	DCA
		*	MCM	4107.9	
Q0038	OXYGEN CONTENTS, GASEOUS, PER UNIT (FOR USE WITH OWNED GASEOUS STATIONARY SYSTEMS OR WHEN BOTH A STATIONARY AND PORTABLE GASEOUS SYSTEM ARE OWNED; 1 UNIT = 50 CUBIC FT.)	*	M/D=1188 A/C=A	COV=D	DCA
		*	MCM	4107.9	
Q0039	OXYGEN CONTENTS, LIQUID, PER UNIT, (FOR USE WITH OWNED STATIONARY LIQUID SYSTEMS OR WHEN BOTH A STATIONARY AND PORTABLE LIQUID SYSTEM ARE OWNED; 1 UNIT = 10 LBS.)	*	M/D=1188 A/C=A	COV=D	DCA
		*	MCM	4107.9	
Q0040	PORTABLE OXYGEN CONTENTS, GASEOUS PER UNIT (FOR USE ONLY WITH PORTABLE GASEOUS SYSTEMS WHEN NO STATIONARY GAS SYSTEM IS USED; 1 UNIT = 5 CUBIC FT.)	*	M/D=1188 A/C=A	COV=D	DCA
		*	MCM	4107.9	
Q0041	PORTABLE OXYGEN CONTENTS, LIQUID, PER UNIT (FOR USE ONLY WITH PORTABLE LIQUID SYSTEMS WHEN NO STATIONARY LIQUID SYSTEM IS USED; 1 UNIT = 1 LB.)	*	M/D=1188 A/C=A	COV=D	DCA
		*	MCM	4107.9	
Q0042	STATIONARY COMPRESSED GAS SYSTEM RENTAL, INCLUDES CONTENTS (PER UNIT), REGULATOR WITH FLOW GAUGE, HUMIDIFIER, NEBULIZER, CANNULA OR MASK & TUBING, 1 UNIT = 50 CUBIC FT.	*	M/D=1188 A/C=A	COV=D	DCA
		*	MCM	4107.9	
Q0043	STATIONARY LIQUID OXYGEN SYSTEM RENTAL, INCLUDES CONTENTS (PER UNIT)' USE OF RESERVOIR, CONTENTS INDICATOR, FLOWMETER, HUMIDIFIER, NEBULIZER, CANNULA OR MASK AND TUBING; 1 UNIT OF CONTENTS = 10 LBS.	*	M/D=1188 A/C=A	COV	DCA

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HCFA COMMON PROCEDURE CODING SYSTEM

Q0044 BRIEF OFFICE VISIT FOR THE SOLE PURPOSE OF MONITORING OR CHANGING DRUG PRESCRIPTIONS, USED IN THE TREATMENT OF MENTAL, PSYCHONEUROTIC AND PERSONALITY DISORDERS

Q0045 ANESTHESIA FOR IRIDECTOMY

Q0046 PORTABLE LIQUID OXYGEN SYSTEM RENTAL, INCLUDES FLOWMETER, REFILL ADAPTOR, CONTENTS GAUGE, CANNULA AND TUBING

Q0047 ANESTHESIA FOR BLEPHAROPLASTY

Q0050 PARENTERAL NUTRITION SOLUTION: COMPOUNDED AMINO ACID AND CARBOHYDRATES WITH ELECTROLYTES, TRACE ELEMENTS, AND VITAMINS, INCLUDING PREPARATION, ANY STRENGTH, 10 TO 51 GRAMS OF PROTEIN - PREMIX

Q0051 PARENTERAL NUTRITION SOLUTION: COMPOUNDED AMINO ACID AND CARBOHYDRATES WITH ELECTROLYTES, TRACE ELEMENTS, AND VITAMINS, INCLUDING PREPARATION, ANY STRENGTH, 52 TO 73 GRAMS OF PROTEIN - PREMIX

Q0052 PARENTERAL NUTRITION SOLUTION: COMPOUNDED AMINO ACID AND CARBOHYDRATES WITH ELECTROLYTES, TRACE ELEMENTS AND VITAMINS, INCLUDING PREPARATION, ANY STRENGTH, 74 TO 100 GRAMS OF PROTEIN - PREMIX

Q0053 PARENTERAL NUTRITION SOLUTION: COMPOUNDED AMINO ACID AND CARBOHYDRATES WITH ELECTROLYTES, TRACE ELEMENTS AND VITAMINS, INCLUDING PREPARATION, ANY STRENGTH, OVER 100 GRAMS OF PROTEIN - PREMIX

Q0054 PARENTERAL NUTRITION SOLUTION: COMPOUNDED AMINO ACID AND CARBOHYDRATE WITH ELECTROLYTES, TRACE ELEMENTS, AND VITAMINS, INCLUDING PREPARATION, ANY STRENGTH, STRESS - BRANCH CHAIN AMINO ACIDS - PREMIX

Q0055 PARENTERAL NUTRITION SOLUTION: COMPOUNDED AMINO ACID AND CARBOHYDRATES WITH ELECTROLYTES, TRACE ELEMENTS, AND VITAMINS, INCLUDING PREPARATION, ANY STRENGTH, HEPATIC - FREAMINE H8C, HEPATAMINE - PREMIX

Q0056 PARENTERAL NUTRITION SOLUTION: COMPOUNDED AMINO ACID AND CARBOHYDRATES WITH ELECTROLYTES, TRACE ELEMENTS, AND VITAMINS, INCLUDING PREPARATION, ANY STRENGTH, RENAL - AMIROSYN RF, NEPHRAMINE, RENAMINE - PREMIX

Q0066 ASSESSMENT OF CARDIAC OUTPUT BY ELECTRICAL BIOIMPEDANCE

M/D=1189 A/C=A COV=D DCA
MCM 2476.3

M/D=1189 A/C=A COV DCA=90
MCM 8313

M/D=1189 A/C=A COV DCA=90
MCM 4107.9

M/D=1189 A/C=A COV DCA=90
MCM 8313

M/D=1187 A/C=D COV DCA
XR1=84189 XR2 XR3

M/D=1187 A/C=D COV DCA
XR1=84193 XR2 XR3

M/D=1187 A/C=D COV DCA
XR1=84197 XR2 XR3

M/D=1187 A/C=D COV DCA
XR1=84199 XR2 XR3

M/D=1187 A/C=D COV DCA
XR1=85200 XR2 XR3

M/D=1187 A/C=D COV DCA
XR1=85100 XR2 XR3

M/D=1187 A/C=D COV DCA
XR1=85000 XR2 XR3

M/D=1189 A/C=A COV=M DCA=90
CIN=50-54 F/D RI

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HCFA COMMON PROCEDURE CODING SYSTEM

[illegible]

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HCFA ASSIGNMENT OF INTEGUMENTARY SYSTEM SUR. SER. T1000 - T1999

ALL CODES IN THIS SECTION HAVE BEEN DELETED. MEDICARE CARRIERS HAVE
MAPPING/CROSSWALK INSTRUCTIONS.

HCFA COMMON PROCEDURE CODING SYSTEM

*	W/D=1188 A/C=A	DCA
*		
*	W/D=1188 A/C=A	DCA
*	W/D=1188 A/C=A	DCA

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HCFA COMMON PROCEDURE CODING SYSTEM

ASSIGNMENT OF VISION SERVICES (V0000 - V2799)
FRAMES

V2020	FRAMES, PURCHASES SPECTACLE LENSES IF PROCEDURE CODE 92390 OR 92395 IS REPORTED, RECODE WITH THE SPECIFIC LENS TYPE LISTED BELOW. FOR APHAKIC TEMPORARY SPECTACLE CORRECTION, SEE 92358. SINGLE VISION, GLASS OR PLASTIC	M/D=1184 A/C	COV	DCA
V2100	SPHERE, SINGLE VISION, PLANO TO PLUS OR MINUS 4.00, PER LENS	M/D=1184 A/C	COV	DCA
V2101	SPHERE, SINGLE VISION, PLUS OR MINUS 4.12 TO PLUS OR MINUS 7.00D, PER LENS	M/D=1184 A/C	COV	DCA
V2102	SPHERE, SINGLE VISION, PLUS OR MINUS 7.12 TO PLUS OR MINUS 20.00D, PER LENS	M/D=1184 A/C	COV	DCA
V2103	SPHEROCYLINDER, SINGLE VISION, PLANO TO PLUS OR MINUS 4.00D SPHERE, .12 TO 2.00D CYLINDER, PER LENS	M/D=1184 A/C	COV	DCA
V2104	SPHEROCYLINDER, SINGLE VISION, PLANO TO PLUS OR MINUS 4.00D SPHERE, 2.12 TO 4.00D CYLINDER, PER LENS	M/D=1184 A/C	COV	DCA
V2105	SPHEROCYLINDER, SINGLE VISION, PLANO TO PLUS OR MINUS 4.00D SPHERE, 4.25 TO 6.00D CYLINDER, PER LENS	M/D=1184 A/C	COV	DCA
V2106	SPHEROCYLINDER, SINGLE VISION, PLANO TO PLUS OR MINUS 4.00D SPHERE, OVER 6.00D CYLINDER, PER LENS	M/D=1184 A/C	COV	DCA
V2107	SPHEROCYLINDER, SINGLE VISION, PLUS OR MINUS 4.25 TO PLUS OR MINUS 7.00 SPHERE, .12 TO 2.00D CYLINDER, PER LENS	M/D=1184 A/C	COV	DCA
V2108	SPHEROCYLINDER, SINGLE VISION, PLUS OR MINUS 4.25D TO PLUS OR MINUS 7.00D SPHERE, 2.12 TO 4.00D CYLINDER, PER LENS	M/D=1184 A/C	COV	DCA
V2109	SPHEROCYLINDER, SINGLE VISION, PLUS OR MINUS 4.25 TO PLUS OR MINUS 7.00D SPHERE, 4.25 TO 6.00D CYLINDER, PER LENS	M/D=1184 A/C	COV	DCA
V2110	SPHEROCYLINDER, SINGLE VISION, PLUS OR MINUS 4.25 TO 7.00D SPHERE, OVER 6.00D CYLINDER, PER LENS	M/D=1184 A/C	COV	DCA
V2111	SPHEROCYLINDER, SINGLE VISION, PLUS OR MINUS 7.25 TO PLUS OR MINUS 12.00D SPHERE, .25 TO 2.25D CYLINDER, PER LENS	M/D=1184 A/C	COV	DCA
V2112	SPHEROCYLINDER, SINGLE VISION, PLUS OR MINUS 7.25 TO PLUS OR MINUS 12.00D SPHERE, 2.25D TO 4.00D CYLINDER, PER LENS	M/D=1184 A/C	COV	DCA

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HCFA COMMON PROCEDURE CODING SYSTEM

V2113 SPHEROCYLINDER, SINGLE VISION, PLUS OR MINUS 7.25 TO PLUS OR MINUS 12.00D SPHERE, 4.25 TO 6.00D CYLINDER, PER LENS

V2114 SPHEROCYLINDER, SINGLE VISION, SPHERE OVER PLUS OR MINUS 12.00D, PER LENS

V2115 LENTICULAR, (MYODISC), PER LENS, SINGLE VISION

V2116 LENTICULAR LENS, NONASPHERIC, PER LENS, SINGLE VISION

V2117 LENTICULAR, ASPHERIC, PER LENS, SINGLE VISION

V2118 ANISEIKONIC LENS, SINGLE VISION

V2199 NOT OTHERWISE CLASSIFIED, SINGLE VISION LENS
BIFOCAL, GLASS OR PLASTIC (UP TO AND INCLUDING
28MM SEQ WIDTH, ADD POWER UP TO AND INCLUDING 3.25D)

V2200 SPHERE, BIFOCAL, PLANO TO PLUS OR MINUS 4.00D, PER LENS

V2201 SPHERE, BIFOCAL, PLUS OR MINUS 4.12 TO PLUS OR MINUS 7.00D,
PER LENS

V2202 SPHERE, BIFOCAL, PLUS OR MINUS 7.12 TO PLUS OR MINUS 20.00D, PER LENS

V2203 SPHEROCYLINDER, BIFOCAL, PLANO TO PLUS OR MINUS 4.00D SPHERE,
.12 TO 2.00D CYLINDER, PER LENS

V2204 SPHEROCYLINDER, BIFOCAL, *PLANO TO PLUS OR MINUS 4.00D SPHERE,
2.12 TO 4.00D CYLINDER, PER LENS

V2205 SPHEROCYLINDER, BIFOCAL, PLANO TO PLUS OR MINUS 4.00D SPHERE,
4.25 TO 6.00D CYLINDER, PER LENS

V2206 SPHEROCYLINDER, BIFOCAL, PLANO TO PLUS OR MINUS 4.00D SPHERE,
OVER 6.00D CYLINDER, PER LENS

V2207 SPHEROCYLINDER, BIFOCAL, PLUS OR MINUS 4.25 TO PLUS OR MINUS
7.00D SPHERE, .12 TO 2.00D CYLINDER, PER LENS

V2208 SPHEROCYLINDER, BIFOCAL, PLUS OR MINUS 4.25 TO PLUS OR MINUS
7.00D SPHERE, 2.12 TO 4.00D CYLINDER, PER LENS

V2209 SPHEROCYLINDER, BIFOCAL, PLUS OR MINUS 4.25 TO PLUS OR MINUS
7.00D SPHERE, 4.25 TO 6.00D CYLINDER, PER LENS

V2210 SPHEROCYLINDER, BIFOCAL, PLUS OR MINUS 4.25 TO PLUS OR MINUS
7.00D SPHERE, OVER 6.00D CYLINDER, PER LENS

M/D=1189 A/C=C COV DCA

M/D=1184 A/C COV DCA

M/D=1184 A/C COV DCA

M/D=1184 A/C COV DCA

M/D=1184 A/C COV DCA

M/D=1184 A/C COV DCA

M/D=1184 A/C COV DCA

M/D=1184 A/C COV DCA

M/D=1184 A/C COV DCA

M/D=1184 A/C COV DCA

M/D=1184 A/C COV DCA

M/D=1184 A/C COV DCA

M/D=1184 A/C COV DCA

M/D=1184 A/C COV DCA

M/D=1184 A/C COV DCA

M/D=1184 A/C COV DCA

M/D=1184 A/C COV DCA

M/D=1184 A/C COV DCA

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HCFA COMMON PROCEDURE CODING SYSTEM

V2211	SPHEROCYLINDER, BIFOCAL, PLUS OR MINUS 7.25 TO PLUS OR MINUS 12.00D SPHERE, 25 TO 2.25D CYLINDER, PER LENS	*	M/D=1184	A/C	COV	DCA
V2212	SPHEROCYLINDER, BIFOCAL, PLUS OR MINUS 7.25 TO PLUS OR MINUS 12.00D SPHERE, 2.25 TO 4.00D CYLINDER, PER LENS	*	M/D=1184	A/C	COV	DCA
V2213	SPHEROCYLINDER, BIFOCAL, PLUS OR MINUS 7.25 TO PLUS OR MINUS 12.00D SPHERE, 4.25 TO 6.00D CYLINDER, PER LENS	*	M/D=1184	A/C	COV	DCA
V2214	SPHEROCYLINDER, BIFOCAL, SPHERE OVER PLUS OR MINUS 12.00D, PER LENS	*	M/D=1184	A/C	COV	DCA
V2215	LENTICULAR (MYODISC), PER LENS, BIFOCAL	*	M/D=1184	A/C	COV	DCA
V2216	LENTICULAR, NONASPHERIC, PER LENS, BIFOCAL	*	M/D=1184	A/C	COV	DCA
V2217	LENTICULAR, ASPHERIC LENS, BIFOCAL	*	M/D=1184	A/C	COV	DCA
V2218	ANISEIKONIC, PER LENS, BIFOCAL	*	M/D=1184	A/C	COV	DCA
V2219	BIFOCAL SEQ WIDTH OVER 28MM	*	M/D=1184	A/C	COV	DCA
V2220	BIFOCAL ADD OVER 3.25D	*	M/D=1184	A/C	COV	DCA
V2299	SPECIALTY BIFOCAL (BY REPORT) TRIFOCAL, GLASS OR PLASTIC (UP TO AND INCLUDING 28MM SEQ WIDTH, ADD POWER UP TO AND INCLUDING 3.25D)	*	M/D=1184	A/C	COV	DCA
V2300	SPHERE, TRIFOCAL, PLANO TO PLUS OR MINUS 4.00D, PER LENS	*	M/D=1184	A/C	COV	DCA
V2301	SPHERE, TRIFOCAL, PLUS OR MINUS 4.12 TO PLUS OR MINUS 7.00D PER LENS	*	M/D=1184	A/C	COV	DCA
V2302	SPHERE, TRIFOCAL, PLUS OR MINUS 7.12 TO PLUS OR MINUS 20.00, PER LENS	*	M/D=1184	A/C	COV	DCA
V2303	SPHEROCYLINDER, TRIFOCAL, PLANO TO PLUS OR MINUS 4.00D SPHERE, .12-2.00D CYLINDER, PER LENS	*	M/D=1184	A/C	COV	DCA
V2304	SPHEROCYLINDER, TRIFOCAL, PLANO TO PLUS OR MINUS 4.00D SPHERE, 2.25-4.00D CYLINDER, PER LENS	*	M/D=1184	A/C	COV	DCA
V2305	SPHEROCYLINDER, TRIFOCAL, PLANO TO PLUS OR MINUS 4.00D SPHERE, 4.25 TO 6.00 CYLINDER, PER LENS	*	M/D=1184	A/C	COV	DCA
V2306	SPHEROCYLINDER, TRIFOCAL, PLANO TO PLUS OR MINUS 4.00D SPHERE, OVER 6.00D CYLINDER, PER LENS	*	M/D=1184	A/C	COV	DCA
V2307	SPHEROCYLINDER, TRIFOCAL, PLUS OR MINUS 4.25 TO PLUS OR MINUS 7.00D SPHERE, .12 TO 2.00D CYLINDER, PER LENS	*	M/D=1184	A/C	COV	DCA

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HCFA COMMON PROCEDURE CODING SYSTEM

V2308 SPHEROCYLINDER, TRIFOCAL, PLUS OR MINUS 4.25 TO PLUS OR MINUS 7.00D SPHERE, 2.12 TO 4.00D CYLINDER, PER LENS

V2309 SPHEROCYLINDER, TRIFOCAL, PLUS OR MINUS 4.25 TO PLUS OR MINUS 7.00D SPHERE, 4.25 TO 6.00D CYLINDER, PER LENS

V2310 SPHEROCYLINDER, TRIFOCAL, PLUS OR MINUS 4.25 TO PLUS OR MINUS 7.00D SPHERE, OVER 6.00D CYLINDER, PER LENS

V2311 SPHEROCYLINDER, TRIFOCAL, PLUS OR MINUS 7.25 TO PLUS OR MINUS 12.00D SPHERE, .25 TO 2.25D CYLINDER, PER LENS

V2312 SPHEROCYLINDER, TRIFOCAL, PLUS OR MINUS 7.25 TO PLUS OR MINUS 12.00D SPHERE, 2.25 TO 4.00D CYLINDER, PER LENS

V2313 SPHEROCYLINDER, TRIFOCAL, PLUS OR MINUS 7.25 TO PLUS OR MINUS 12.00D SPHERE, 4.25 TO 6.00D CYLINDER, PER LENS

V2314 SPHEROCYLINDER, TRIFOCAL, SPHERE OVER PLUS OR MINUS 12.00D, PER LENS

V2315 LENTICULAR, (MYODISC), PER LENS, TRIFOCAL

V2316 LENTICULAR NONASPHERIC, PER LENS, TRIFOCAL

V2317 LENTICULAR, ASPHERIC LENS, TRIFOCAL

V2318 ANISEIKONIC LENS, TRIFOCAL

V2319 TRIFOCAL SEG WIDTH OVER 28 MM

V2320 TRIFOCAL ADD OVER 3.25D

V2399 SPECIALTY TRIFOCAL (BY REPORT)
VARIABLE ASPHERICITY (WELSH 4-DROP, HYPERASPHERIC,
DOUBLE DROP, ECT.)

V2410 VARIABLE ASPHERICITY LENS, SINGLE VISION, FULL FIELD, GLASS
OR PLASTIC, PER LENS

V2430 VARIABLE ASPHERICITY LENS, BIFOCAL, FULL FIELD, GLASS OR PLASTIC,
PER LENS

V2499 NOT OTHERWISE CLASSIFIED, VARIABLE SPHERICITY LENS
CONTACT LENSES
IF PROCEDURE CODE 92391 OR 92396 IS REPORTED, RECODE
WITH SPECIFIC LENS TYPE LISTED BELOW (PER LENS)

V2500 CONTACT LENS, PMMA, SPHERICAL, PER LENS

M/D=1184 A/C COV DCA

M/D=1184 A/C COV DCA

M/D=1184 A/C COV DCA

M/D=1184 A/C COV DCA

M/D=1184 A/C COV DCA

M/D=1184 A/C COV DCA

M/D=1184 A/C COV DCA

M/D=1184 A/C COV DCA

M/D=1184 A/C COV DCA

M/D=1184 A/C COV DCA

M/D=1184 A/C COV DCA

M/D=1184 A/C COV DCA

M/D=1184 A/C COV DCA

M/D=1184 A/C COV DCA

M/D=1185 A/C=C COV DCA

M/D=1185 A/C=C COV DCA

M/D=1185 A/C=C COV DCA

M/D=1184 A/C COV DCA

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HCFA COMMON PROCEDURE CODING SYSTEM

V2501 CONTACT LENS, PMMA, TORIC OR PRISM BALLAST, PER LENS

V2502 CONTACT LENS PMMA, BIFOCAL, PER LENS

V2503 CONTACT LENS PMMA, COLOR VISION DEFICIENCY, PER LENS

V2510 CONTACT LENS, GAS PERMEABLE, SPHERICAL, PER LENS

V2511 CONTACT LENS, GAS PERMEABLE, TORIC, PRISM BALLAST, PER LENS

V2512 CONTACT LENS, GAS PERMEABLE, BIFOCAL, PER LENS

V2513 CONTACT LENS, GAS PERMEABLE, EXTENDED WEAR, PER LENS

V2520 CONTACT LENS HYDROPHILIC, SPHERICAL, PER LENS

V2521 CONTACT LENS HYDROPHILIC, TORIC, OR PRISM BALLAST, PER LENS

V2522 CONTACT LENS HYDROPHILIC, BIFOCAL, PER LENS

V2523 CONTACT LENS HYDROPHILIC, EXTENDED WEAR, PER LENS

V2530 CONTACT LENS, SCLERAL, PER LENS
(FOR CONTACT LENS MODIFICATION, SEE 92325)

V2599 NOT OTHERWISE CLASSIFIED, CONTACT LENS
LOW VISION AIDS
IF PROCEDURE CODE 92392 IS REPORTED, RECODE
WITH SPECIFIC SYSTEMS LISTED BELOW

V2600 HAND HELD LOW VISION AIDS AND OTHER NONSPECTACLE MOUNTED AIDS

V2610 SINGLE LENS SPECTACLE MOUNTED LOW VISION AIDS

V2615 TELESCOPIC AND OTHER COMPOUND LENS SYSTEM, INCLUDING DISTANCE
VISION TELESCOPIC, NEAR VISION TELESCOPES AND COMPOUND
MICROSCOPIC LENS SYSTEM

HCFA ASSIGNMENT OF EYE PROSTHESIS V2620-V2629

PROSTHETIC EYE

V2620 PROSTHETIC, EYE, GLASS, STOCK

M/D=1184 A/C COV DCA

M/D=1184 A/C COV DCA

M/D=1184 A/C COV DCA

M/D=1184 A/C COV DCA

M/D=1184 A/C COV DCA

M/D=1184 A/C COV DCA

M/D=1184 A/C COV DCA

M/D=1189 A/C=F COV=D DCA
CIM=45-7 65-1 F/D RI

M/D=1189 A/C=F COV=D DCA
CIM=45-7 65-1 F/D RI

M/D=1189 A/C=F COV=D DCA
CIM=45-7 65-1 F/D RI

M/D=1189 A/C=F COV=D DCA
CIM=45-7 65-1 F/D RI

M/D=1184 A/C COV DCA

M/D=1184 A/C COV DCA

M/D=1184 A/C COV DCA

M/D=1189 A/C=F COV=D DCA
MCM 2130A

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HCFA COMMON PROCEDURE CODING SYSTEM

V2621 PROSTHETIC, EYE PLASTIC, STOCK

V2622 PROSTHETIC, EYE, GLASS, CUSTOM

V2623 PROSTHETIC EYE, PLASTIC, CUSTOM

V2629 NOT OTHERWISE CLASSIFIED, PROSTHETIC EYE
INTRACULAR LENSES

V2630 ANTERIOR CHAMBER INTRACULAR LENS

V2631 IRIS SUPPORTED INTRACULAR LENS

V2632 POSTERIOR CHAMBER INTRACULAR LENS
MISCELLANEOUS

V2700 BALANCE LENS, PER LENS

V2710 SLAB OFF PRISM, GLASS OR PLASTIC. PER LENS

V2715 PRISM, PER LENS

V2718 PRESS-ON LENS, FRESNELL PRISM, PER LENS

V2730 SPECIAL BASE CURVE, GLASS OR PLASTIC, PER LENS

V2740 TINT, PLASTIC, ROSE 1 OR 2 PER LENS

V2741 TINT, PLASTIC, OTHER THAN ROSE 1-2, PER LENS

V2742 TINT, GLASS ROSE 1 OR 2, PER LENS

V2743 TINT, GLASS OTHER THAN ROSE 1 OR 2 PER LENS

V2744 TINT, PHOTOCHROMATIC, PER LENS

V2750 ANTI-REFLECTIVE COATING, PER LENS

V2755 U-V LENS, PER LENS

V2760 SCRATCH RESISTANT COATING, PER LENS

V2770 OCCLUDER LENS, PER LENS

M/D=1189 A/C=F COV=D DCA
MCM 2130AM/D=1189 A/C=F COV=D DCA
MCM 2130AM/D=1189 A/C=F COV=D DCA
MCM 2130A

M/D=1184 A/C COV DCA

M/D=1189 A/C=F COV=D DCA
CIN=35-44 F/D RI

M/D=1184 A/C COV DCA

M/D=1184 A/C COV DCA

M/D=1184 A/C COV DCA

M/D=1184 A/C COV DCA

M/D=1184 A/C COV DCA

M/D=1184 A/C COV DCA

M/D=1184 A/C COV DCA

M/D=1184 A/C COV DCA

M/D=1184 A/C COV DCA

M/D=1184 A/C COV DCA

M/D=1184 A/C COV DCA

M/D=1184 A/C COV DCA

M/D=1184 A/C COV DCA

M/D=1184 A/C COV DCA

M/D=1184 A/C COV DCA

M/D=1184 A/C COV DCA

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HCFA COMMON PROCEDURE CODING SYSTEM

V2780 OVERSIZE LENS, PER LENS

V2785 PROCESSING, PRESERVING AND TRANSPORTING CORNEAL TISSUE

V2799 NOT OTHERWISE CLASSIFIED

HCFA ASSIGNMENT OF HEARING SERVICES V5000 - V5299 (THESE CODES ARE FOR NON-PHYSICIAN SERVICES)

V5000 BASIC AUDIOLOGIC ASSESSMENT - HEARING ASSESSMENT INCLUDING THE MEASURING OF HEARING ACUITY AND TESTS RELATING TO AIR CONDUCTION, BONE CONDUCTION, RECEPTION THRESHOLD, SPEECH DISCRIMINATION, AND ACOUSTIC IMMITTANCE TESTS (EXCLUDES HEARING AID ASSESSMENT)

V5001 COMPREHENSIVE AUDIOLOGIC ASSESSMENT - HEARING ASSESSMENT INCLUDING A BASIC AUDIOLOGIC ASSESSMENT AND ASSESSMENT OF VESTIBULAR AND/OR AUDIOLOGIC FUNCTION BY SPECIALIZED ELECTROPHYSIOLOGIC AND/OR BEHAVIORAL TESTS

V5002 ASSESSMENT OF VESTIBULAR AND/OR AUDIOLOGIC FUNCTION BY SPECIALIZED ELECTROPHYSIOLOGIC TEST(S), EG., AUDITORY EVOKED POTENTIALS, ELECTRONYSTAGMOGRAPHY, ELECTROCOCHLEOGRAPHY

V5003 ASSESSMENT OF VESTIBULAR AND/OR AUDIOLOGIC FUNCTION BY SPECIALIZED BEHAVIORAL TEST(S), EG., SPECIALIZED SPEECH TESTS AND TESTS FOR NON-ORGANIC HEARING ETIOLOGY

V5008 HEARING SCREENING

V5010 ASSESSMENT FOR HEARING AID

V5011 FITTING/ORIENTATION/CHECKING OF HEARING AID

V5012 COMPLETE COCHLEAR IMPLANT REHABILITATION INCLUDING ADJUSTING AND TESTING OF EQUIPMENT AND AUDITORY TRAINING

V5014 REPAIR/MODIFICATION OF A HEARING AID

V5016 UNLISTED AUDIOLOGIC PROCEDURE (SPECIFY)

V5020 CONFORMITY EVALUATION

V5030 HEARING AID, MONAURAL, BODY WORN, AIR CONDUCTION

V5040 HEARING AID, MONAURAL, BODY WORN, BONE CONDUCTION

V5050 HEARING AID, MONAURAL, IN THE EAR

M/D=1184 A/C COV DCA

M/D=1189 A/C=A COV=D DCA=90
MCM 5200

M/D=1184 A/C COV DCA

M/D=1189 A/C A DCA

M/D=1189 A/C A DCA

M/D=1189 A/C=C COV=D DCA

MCM 2070.3

M/D=1189 A/C=A COV=D DCA=90

MCM 2070.3

M/D=1189 A/C=A COV=D DCA=90

MCM 2070.3

M/D=1189 A/C=A COV=D DCA=90

MCM 2070.3

M/D=1189 A/C=A COV=S DCA=90

M/D=1189 A/C=C COV=S DCA=90

M/D=1189 A/C=A COV=S DCA

M/D=1189 A/C=A COV=D DCA=90

CIM=65-14 F/D RI

MCM 2050.1

M/D=1189 A/C=A COV=S DCA=90

M/D=1189 A/C=A COV=D DCA=90

MCM 2070.3

M/D=1183 A/C COV=M DCA

M/D= 986 A/C=E COV=M DCA

M/D= 986 A/C=E COV=M DCA

M/D=1181 A/C COV=M DCA

HCFA COMMON PROCEDURE CODING SYSTEM

[illegible]

12/14/89

209

HCFA COMMON PROCEDURE CODING SYSTEM

SPEECH-LANGUAGE PATHOLOGY SERVICES V5300 - V5399
(THESE CODES ARE FOR NON-PHYSICIAN SERVICES)

V5301 BASIC ASSESSMENT OF SPECIFIC SINGLE SPEECH, VOICE, LANGUAGE COGNITIVE/
COMMUNICATION OR ORAL/PHARYNGEAL (EG., DYSPHAGIA) DISORDER
(EXCLUDES SCREENING)

V5310 COMPREHENSIVE ASSESSMENT OF SPEECH, VOICE, LANGUAGE SYSTEMS, ORAL/
PHARYNGEAL SENSORI-MOTOR COMPETENCIES AND/OR COMMUNICATION ABILITIES
OF A HEARING IMPAIRED INDIVIDUAL (AURAL REHABILITATION ASSESSMENT)
(EXCLUDES SCREENING)

V5321 ASSESSMENT FOR ORAL OR LARYNGEAL PROSTHESIS OR ARTIFICIAL LARYNX
(EXCLUDES V5010 HEARING AID ASSESSMENT)

V5322 ASSESSMENT FOR AUGMENTATIVE COMMUNICATIVE SYSTEM OR DEVICE
(EXCLUDES V5010 HEARING AID ASSESSMENT)

V5330 TREATMENT FOR SPEECH, LANGUAGE, ORAL/PHARYNGEAL AND/OR COMMUNICATION
DISORDER, PER SESSION

V5335 REPAIR/MODIFICATION OF ORAL OR LARYNGEAL PROTHESIS OR ARTIFICIAL LARYNX

V5336 REPAIR/MODIFICATION OF AUGMENTATIVE COMMUNICATIVE SYSTEM OR DEVICE
(EXCLUDES ADAPTIVE HEARING AID)

V5360 UNLISTED SPEECH-LANGUAGE SERVICE (SPECIFY)

V5362 SPEECH SCREENING

V5363 LANGUAGE SCREENING

V5364 DYSPHAGIA SCREENING

*	M/D=1189	A/C A	DCA
*	M/D=1189	A/C A	DCA
*			
*	M/D=1189	A/C=A COV=D	DCA=90
*	MCN	2216	
*			
*	M/D=1189	A/C=A COV=D	DCA=90
*	MCN	2216	
*			
*	M/D=1189	A/C=A COV=D	DCA=90
*	MCN	2216	
*			
*	M/D=1189	A/C=A COV=D	DCA=90
*	MCN	2216	
*			
*	M/D=1189	A/C=A COV=D	DCA=90
*	MCN	2030.D	
*			
*	M/D=1189	A/C=A COV=S	DCA=90
*			
*	M/D=1189	A/C=A COV=D	DCA=90
*	MCN	2216	
*			
*	M/D=1189	A/C=A COV=S	DCA=90
*			
*	M/D=1189	A/C=A COV=S	DCA=90
*			
*	M/D=1189	A/C=A COV=S	DCA=90
*			

0001--FOR EXAMPLE, ROHD, JAY OR EQUIVALENT PAD

0002--THIS IS TAKEN TO MEAN PERFORMING ANALYSIS FOR THE ANALYTE AS OPPOSED TO ADMINISTRATION OF THE PRODUCT.

0003--THIS IS USUALLY PART OF AUTOMATED PROFILES FOR CBC AND CONSIDERATION SHOULD BE GIVEN TO NOT PAYING SEPARATELY FOR THESE INDICES.

0004--SPECIFY CONSTITUENT IF ROUTINE CHEMISTRY 310, IF DRUG 330, IF
ENDOCRINE TEST, 330.

0005--THE CERTIFICATION CATEGORY WILL DEPEND ON THE TYPE OF TEST/OR ORGANISM IDENTIFIED AND THERE MUST BE AN IDENTIFIER TO INDICATE THE SPECIFIC TESTING PERFORMED.

0006--THIS IS NOT A LAB TEST AND IS NOT CERTIFIED.

0007--THE LAB SHOULD NOT BILL FOR BOTH THE METHOD AND THE TEST CODE.

0008--THIS CODE IS CROSS-REFERRED TO E1377 THROUGH E1385

0009--MEDROXYPROGESTERONE ACETATE FOR CHEMOTHERAPY, SEE J9240

0010-PROCESS CLAIM UNDER INSTRUCTIONS FOR M0945

0011-PROCESS CLAIM UNDER INSTRUCTIONS FOR M0974

0012-MORE THAN ONE SPECIALTY CODE: ABD, RH(D) SCREENING = ILC510;
RBC ANTIBODY SCREENING = ILC540

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